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ABSTRACT

This guide was developed to inform the child care industry about the Americans with Disabilities Act (ADA) and to familiarize child care providers with the importance and value of including all children in regular child care settings. It offers an overview of the law as well as practical solutions to common problems and advice to ensure success in caring for children with disabilities and complying with Title III of the ADA. Chapter 1 explains the parts of the ADA; defines terms used in the legislation; and outlines how Title III requirements affect day care center enrollment policies, facilities, and day-to-day operations. Chapter 2 discusses steps to take to comply with the ADA and what to do for children with specific types of disabilities. Chapter 3 provides an eight-step process to successful inclusion of children with disabilities in child care programs. Chapter 4 offers vignettes of five preschool-age children who attend day care centers, describing each child's specific disability and accommodations implemented by the child care center. Chapter 5 lists resources, such as assistance programs, books, videos, toll-free telephone information services, federal agencies, and others. An appendix notes how the ADA can be enforced. (JDD)

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ALL KIDS COUNT

Child Care and the Americans with Disabilities Act (ADA)

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ALL KIDS COUNT

Child Care and the Americans with Disabilities Act (ADA)

BY
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All Kids Count was developed with funding from the U.S. Department of Justice through a project conducted by The Arc National Headquarters.

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a national organization on mental retardation

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Additional copies of *All Kids Count* can be ordered by contacting The Arc, P.O. Box 1047, Arlington, TX 76004.

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Foreword

The Americans with Disabilities Act (ADA) instituted sweeping changes in protecting all children and adults with disabilities. The law safeguards these individuals from employment discrimination based on disability and mandates access to telecommunication, transportation and state and local government services. One of the most important components of the law, however, is Title III which protects children and adults with disabilities from discrimination in places of public accommodation including restaurants, hotels, retail and service establishments, places of public gathering, places of recreation, social services and a multitude of other American enterprises, including the nation's thousands of child care centers and family child care homes.

In 1991, The Arc received a grant from the U.S. Department of Justice to provide information and technical assistance on Title III of the ADA to early child care and education programs. From this project, *All Kids Count* was developed as a guide to inform the child care industry about the law and to familiarize child care providers with the importance and value of including **all children** in regular child care settings.

The Arc is dedicated to promoting full inclusion of children and adults with mental retardation in all aspects of community life. Americans must recognize the importance of the ADA as an instrument to open new doors of opportunity in achieving this mission. Child care providers can guide our society to realize the worth of each individual and offer the opportunity for children with and without disabilities to learn from each other and ultimately become adults enjoying the reality of full inclusion.

So, with great pleasure, The Arc presents *All Kids Count* in hopes that it brings better understanding of the mandates of the law and serves to further include all children with disabilities and their families in the mainstream of American life.

Dave Dunn, President
The Arc

Introduction

Tears fill Ms. Smith's eyes as she hangs up the phone after being rejected by the sixth child care center. Three months ago, Ms. Smiths's husband left her and two children without financial support. Ms. Smith starts a new job in one week; however, she cannot locate child care for Tonya-her six month old infant with mental retardation.

While most parents struggle to find affordable, quality child care, the parent of a child with a disability struggles to find *any* program which will accept his or her child.

The 1990 passage of the Americans with Disabilities Act (ADA) opened a new and exiting world for Ms. Smith, Tonya and other families of children with disabilities. These families can have the same privileges others have enjoyed for years. Child care centers and family child care homes have the opportunity to open their doors wide to welcome all children.

Prior to ADA passage, care for many children with disabilities was limited to family, friends or special disability-only child care centers. Current research has proven that all children develop better in inclusive environments.

This guide is designed to help child care providers successfully include children with disabilities in regular child care environments in compliance with Title III of the ADA. It offers an overview of the law, as well as practical solutions to common problems and advice to ensure success in caring for children with disabilities.

Remember, every child is unique. Caring for a child with a disability, with all its responsibilities, can be rewarding and fun.

LOOKING AT THE AMERICANS WITH DISABILITIES ACT (ADA)

History of the ADA

In 1964, the Civil Rights Act made discrimination on the basis of color, religion, national origin and gender illegal. People with disabilities fought to have disability discrimination added to the Civil Rights Act. However, civil rights supporters felt amending the act would give opponents a chance to weaken the law.

While the courts addressed civil rights issues regarding people with disabilities during the 60s and 70s, they produced few additional rights and protections. Disability groups began to organize and over the years helped pass these laws:

- *Education of All Handicapped Children Act of 1975, which was amended in 1986 then reauthorized and renamed the Individuals with Disabilities Education Act (IDEA) in 1991.*
- *Rehabilitation Act of 1973 (especially Section 504)*
- *Voting Accessibility Act of 1984*
- *Fair Housing Amendments Act of 1988*
- *Developmental Disabilities Act of 1975*

In 1986, Congress asked the National Council on the Handicapped to review all federal laws, programs and policies affecting people with disabilities. The Council discovered widespread discrimination against these individuals and recommended a more complete law.

In 1990, Congress passed the Americans with Disabilities Act (ADA) providing individuals with disabilities the same freedoms as nondisabled Americans.

What is the Americans with Disabilities Act?

Summary of the Law
In July of 1990, President George Bush signed into law the Americans with Disabilities Act (ADA) to provide civil rights protections to individuals with disabilities. The ADA specifically bans discrimination in the following areas:

Employment (Title I)
Private employers can no longer discriminate against any qualified individual with a disability and must provide reasonable accommodations unless an undue hardship would result.

State and Local Governments (Title II)
State and local governments are also prohibited from discriminating against people with disabilities when hiring employees, awarding contracts or providing services. Public transit agencies that provide fixed route transportation to the general public must provide a comparable level of paratransit service for individuals with disabilities who are unable to use the fixed route system.

Public Accommodations and Commercial Facilities (Title III)
Public accommodations must afford an equal opportunity for individuals with disabilities to enjoy goods, services and facilities. Public accommodations that offer transportation services to their clients must provide equivalent transportation services to customers with disabilities.

Telecommunications (Title IV)
Telephone and television companies must provide services to people with hearing and speech impairments.

Who is a person with a disability?

According to the ADA, a person is disabled if at least one of the following criteria applies to him or her.

First, a person is considered to have a disability if he or she has a physical or mental impairment that significantly limits at least one major life activity. Major life activities include:

- *caring for oneself,*
- *performing manual tasks,*
- *walking,*
- *hearing,*
- *seeing,*
- *speaking,*
- *learning,*
- *breathing, and*
- *working.*

Second, a person is considered to have a disability if he or she has a record or history of an impairment that substantially limited one or more of the individual's major life activities or has been misclassified as having such an impairment.

Third, a person is considered to have a disability if he or she is perceived by others as having an impairment.

Examples of physical impairment:

- *Cerebral palsy*
- *Cancer*
- *Muscular dystrophy*
- *Heart disease*
- *Multiple sclerosis*
- *Diabetes*
- *Epilepsy*
- *Tuberculosis*
- *Blindness*
- *HIV virus*
- *Deafness*

Examples of a history or misclassification of impairment:

- *A child had leukemia, but the disease has been in remission for several years.*
- *A child was born with a cleft palate which has been surgically repaired.*
- *A child was mistakenly diagnosed as having mental retardation.*

Examples of mental impairment:

- *Mental retardation*
- *Emotional or mental illness*
- *Specific learning disabilities*
- *Behavior disorders*

Examples of perception of impairment:

- *A child with mild diabetes controlled by medication is not allowed to participate in summer camp sports because of the disease.*
- *A child with a facial disfigurement is refused enrollment in a child care program because staff are afraid the child's appearance will upset the other children.*
- *A child is excluded from a child care center because the director has heard rumors that the child is infected with the HIV virus.*

Which parts of the ADA affect my child care business?

Several sections of the ADA may affect child care operations.

Title I (Employment)

Privately operated centers that employ 15 or more employees may not discriminate on the basis of disability in employment practices.

Title II (State and Local Government Services)

Centers receiving any state or local government funds (through contracts or grants) must be operated in a manner that enables the government entity to meet its Title II obligations. Under Title II, state and local government services may not discriminate simply on the basis of disability in offering individuals the opportunity to participate in a service, program or activity.

> *This guide addresses your responsibilities under Title III only. For more information on Title I or Title II, consult the Resource List in Chapter 5.*

Title III (Places of Public Accommodation; Commercial Facilities)

Privately operated centers or family child care homes must provide equal opportunity for children, parents and others with disabilities to participate in programs and services. Your center is required to undertake certain activities to ensure equal access to your facility, programs and services, including: eliminating or modifying eligibility criteria which discriminate simply on the basis of disability; removing barriers; making reasonable modifications in your policies, practices or procedures; and providing auxiliary aids and services to ensure effective communication.

However, these changes are not required if:

- *barrier removal is not "readily achievable,"*
- *modification of policies, practices or procedures "fundamentally alters" the essential nature of the goods and services your center provides, or*
- *the provision of auxiliary aids and services to ensure effective communication "fundamentally alters" the nature of your service or is an "undue burden" to a business.*

New or altered facilities must be made "readily accessible to and usable by" individuals with disabilities. Your Title III obligations also extend to ensuring that parents, guardians or caretakers who have disabilities also have access to your facility or program.

What is a place of public accommodation?

Title III defines a place of public accommodation as a private business which "owns, leases (or leases to) or operates" an area in which one of the following is located:

- *Social services - Child care centers, family child care homes*
- *Lodging - Hotels, motels*
- *Eateries - Restaurants - Bars*
- *Auditoriums - Theaters*
- *Public meeting places - Convention centers*
- *Stores - Grocery stores, shopping malls*
- *Services - Banks, gas stations, professional services*
- *Transportation - Bus and rail depots*
- *Public exhibits - Museums*
- *Education - Private schools, colleges, vocational schools*
- *Exercise - Health spas, golf courses*
- *Recreation - Parks, zoos, amusement parks*

Is my center covered under Title III?

All child care centers operated by non-religious, private entities are places of public accommodation under the ADA. Under Title III, you are required to provide an equal opportunity for children with disabilities to use your services. These services must be provided in the most integrated setting appropriate to the needs of each individual child.

What if my center is in my home?

A family child care home using a private residence as a business site is *also* covered by Title III requirements. The portions of your home used for business are covered, even if those areas are also used for residential purposes. The requirements also extend to accessible routes from the sidewalk, through the doorway, through the hallways and other portions of the home, such as restrooms, used by the children you serve. Only portions of the home exclusively used for residential purposes are not covered.

EXAMPLE

- *Ms. Jones is a family day care provider. Two rooms and the master bathroom will be used by the children. These rooms are covered under Title III because they are not used exclusively for residential purposes.*

What if my center is affiliated with a church or other religious organization?

For your child care facility to be considered exempt from Title III regulations, its operations must be under the control of a religious entity. The ADA defines a "religious entity" as a religious organization or a business controlled by a religious organization, including a place of worship. All religious entities are exempt from Title III requirements.

However, if your facility receives any state or local government funding, the government entity providing those funds will require you to operate your center in a way that enables the government entity to meet its Title II obligations for program accessibility.

How can I tell if my center is exempt?

To determine whether your child care center is controlled by a religious entity and therefore exempt from Title III requirements, review the bylaws or written policy, comparing them with actual operations of the center.

Ask these questions:

- *What is the structure of the center's board?*
- *Do church officials serve as board members?*
- *Are the center's board members involved in policy making?*
- *Is the religious organization involved in day-to-day operations of the center?*
- *Does the religious organization provide any financial assistance/management?*
- *Does the religious organization have any control in the hiring and firing process?*

Examples of non-exempt child care centers:

- *A child care center rents space from a local church. The center is not exempt from Title III requirements unless it can show that the church controls the operations of the center.*
- *The use of a lay board does not itself remove the ADA's religious exemption. For instance, a parochial child care center, having religious doctrine in its curriculum and sponsored by a religious order, could be exempt even if it has a lay board. The test is whether the church or other religious organization controls the operations of the center or whether the center is itself a religious organization.*

How do specific Title III requirements affect my center?

Examples of exempt child care centers:

- *A child care center is located in space donated by a religious organization. Because the space is donated, the center is exempt from Title III requirements. The child care center is subject to Title III regulations if a lease exists and rent is paid or consideration in some form is given.*
- *A child care center is operated by a church-controlled social service agency. The state Department of Human Services (DHS) contracts with the center for six slots. Because it is church-controlled, this child care center would be exempt under Title III. However, because of the state funding, the center must be operated in such a way that the DHS can fulfill its own Title II obligations as a public entity. The DHS may not discriminate on the basis of disability in contracting for the purchase. Therefore, the state contract establishes that the center will operate in a manner that does not discriminate against children with disabilities.*

The Title III regulation provides specific guidelines which your child care center or family child care home should follow to avoid discrimination. In most cases, modifying some daily activities will make your center accessible and will bring you into compliance with the law. In others, you may have to make more significant structural changes.

If you develop a partnership with the parents, teachers, therapists and other professionals serving a child with a disability, planning and designing activities for the child will be easier and more effective. A team of professionals and the parents can suggest ways to make your physical setting and program accessible. In addition, you can reach out to your local chapter of The Arc, as well as other disability organizations in your area, for information and assistance on making your services accessible. Contact The Arc national headquarters and your local United Way for referrals to organizations in your community.

What about my enrollment policies?

Eligibility criteria

A child care center or family child care home cannot impose strict rules that tend to screen out children with disabilities. A center is required to make changes in any policies which would deny or tend to deny enrollment to a child based on his or her disability.

EXAMPLE

- *Modify rules requiring that all children must walk and talk.*
- *Modify rules stating children with behavioral problems are not accepted.*

Association with a person who has a disability

A facility cannot refuse to accept a child because the child knows or is related to a person with a disability.

EXAMPLE

- *A child without a disability has a younger sister who is infected with the HIV virus. The center cannot refuse to enroll the child without the disability because of her sister's disability.*

What about my day-to-day operations?

Policies, practices and procedures

A child care center or family child care home is required to review its policies and make reasonable changes in daily activities to include children, parents and others with disabilities. However, if changes would affect the nature of the program dramatically, they may not be required. Each person has different needs, and each change should be determined on an individual basis.

EXAMPLE

- *Provide simple instructions and repetition for children with mental retardation.*
- *Allow therapists to provide on-site services for a child with a speech or physical disability.*
- *Provide toileting assistance to children with disabilities if they are not toilet trained.*

Integrated settings

A child cannot be excluded from regular activities. A center should plan and organize all activities to include all children.

EXAMPLE

- *Use hand movements with songs to include children with hearing impairments.*
- *Provide tapes and records in the book center for the child with a visual impairment.*

What about my facility?

Auxiliary aids and services

A child care center or family child care home is required to provide equally effective communication to children or parents who have vision, hearing, speech or cognitive disabilities as it does to individuals without disabilities. If the center can show that providing a particular aid or service is very difficult or costly, the aid or service may be considered an "undue burden" (see page 10) and not be required. Child care centers are *not* required to purchase prescribed hearing aids, eyeglasses or other services of personal nature for children with disabilities.

EXAMPLE

- *Provide activities with small simple steps for children with cognitive impairments.*
- *Provide picture books, large print books and braille books for children with visual impairments.*
- *Use sign language and speak or read slowly for children with hearing impairments.*
- *Repeat words or sentences frequently.*

Barrier removal

Child care centers or family child care homes are required to provide easy access to their facilities and activities for people with disabilities by removing obstacles if doing so is "readily achievable," (see page 10).

Remember that barrier removal is an ongoing obligation. Your center will be responsible for continuing to evaluate and eliminate barriers which may prevent children and parents with disabilities from enjoying your center.

EXAMPLE

- *Provide an accessible parking place.*
- *Provide firm, smooth non-slip floor surfaces for a person using a wheelchair or crutch.*
- *Rearrange the furniture to provide clear pathways.*
- *Provide a ramp at steps.*
- *Provide handrails in the restrooms.*

Alternative barrier removal

If a center cannot easily remove an obstacle, it is required to use alternatives, *if* the alternatives are "readily achievable." Remember, alternative methods are only acceptable when removing an obstacle is not readily achievable.

EXAMPLE

- *In a case where restrooms cannot be made accessible without much difficulty, the center obtains parental approval for the staff to help the child to and from the restroom.*
- *A water fountain cannot easily be made accessible. A water cooler with cups is provided in an accessible location.*

Defining "Readily Achievable" and "Undue Burden"

The terms "readily achievable" and "undue burden" are used in the ADA to describe reasonable limits on the steps necessary to comply with the law.

"Readily achievable" with regard to barrier removal means able to be carried out without much difficulty or expense.

Factors to be considered in determining what is "readily achievable" include the following:

- *The nature and cost of the barrier removal needed.*
- *The overall financial resources of the center, the number of employees working at the center and the effect on the center's expenses and resources.*
- *The overall financial resources of a parent company and the type of its operations, including the composition, structure and functions of its workforce.*
- *Legitimate safety requirements that are necessary for safe operation.*

"Undue burden" with regard to the provision of auxiliary aids and services means significantly difficult or expensive. The same factors listed above are used to determine what is an "undue burden." However, "undue burden" is a higher standard than "readily achievable."

What is considered "readily achievable" or an "undue burden" will vary from center to center. Demonstrating that a particular action would result in an undue burden will be harder to do than showing that an action is not readily achievable. Removing a barrier may be "readily achievable" for one center or home but not for another. Some centers may not experience an "undue burden" when providing auxiliary aids to ensure effective communication, while others may.

Is there anything else I should know?

No regulation can cover every situation. Each child or parent with a disability must be considered an individual with his or her own unique needs. The ADA will be interpreted on an individual-by-individual basis.

COMPLYING WITH TITLE III OF THE ADA

How to Comply with Title III

The following suggestions will help your child care center or family child care home comply with the ADA Title III regulation. However, remember that implementing these suggestions does not guarantee that you are in full compliance with the law. You will have to evaluate the unique needs of each individual child or parent with a disability who participates in your program in order to take appropriate actions under Title III. For more information, consult Chapter 5.

What steps can I take to make my policies and practices comply?

Establish policies that support the inclusion of children or parents with disabilities. Modify enrollment rules and other policies that might automatically exclude a person with a disability *because of* the disability.

EXAMPLE

- *A policy that all children over two years of age must be toilet trained may discriminate on the basis of disability against a six year old who is not yet toilet trained due to his disability.*

Provide services to each child with a disability that are equal to services for all other children, unless separate or different services are necessary. If separate or different services are necessary, they must be *as effective* as those provided to the other children.

EXAMPLE

- *A child with a physical disability is not able to ride the see-saw. The center could provide the opportunity for the child to play on another piece of equipment. This "different" service would allow the child to participate in playground activities.*

See that each child with a disability is provided services in the same rooms or activity areas as all other children, except in particular instances where some separation is needed to enable the child with a disability to have services that are as effective.

Involve the parents of each child with a disability to help your program provide activities that are developmentally appropriate for the child and to help ensure that any safety requirements in your center are based on actual risks and not on mere speculation or stereotypes about children with disabilities.

What about health and safety issues?

Title III of the ADA requires you to carefully assess situations in which you believe there is "significant risk" that a "direct threat" to the health and safety of other children might occur if a particular child participated in an activity. In such situations, ask yourself these questions:

- *What is the nature, duration and severity of the risk?*
- *How likely is it that injury will actually occur?*
- *Would reasonable modification of policies or procedures reduce or eliminate the risk?*

Legitimate safety concerns must be based on *actual risks* and not mere speculation, stereotypes or generalizations about children with disabilities [see ADA Title III regulation Section 36.301(b)]. If you conclude that there is a significant risk to others that cannot be eliminated or reduced to an acceptable level by making reasonable modifications or providing appropriate auxiliary aids or services, you are *not required* to let the child participate.

What can I do for children who have difficulties with language, learning or memory?

Many child care practices and techniques that are effective for nondisabled children will also work well with children with disabilities:

- Establish a well-organized and structured environment.
- Provide simple posters and pictures at child's eye-level.
- Use color codes and pictures instead of just words (color code chests or shelves where different kinds of toys are kept; color code the floor to indicate areas where different activities take place, such as the story area, the crafts area, the snack area, etc.).
- Store materials not being used.
- Establish a routine in which the same things are done each day at the same time.
- Avoid sudden changes. Prepare the child for change and structure transition time.
- Provide age-appropriate activities. Do not place older children with mental retardation in with younger children.
- Break activities into small steps.
- Use simple concrete language and lots of repetition.
- Use short, simple directions.
- Show the child what to do instead of just telling.
- Use as many of the senses as possible, especially when giving directions.
- Ask the child to repeat directions.
- Respond quickly to what the child does.
- Provide the child more time to practice new skills.
- Don't force the child through a task.
- Believe in the child's ability to succeed.
- Encourage and reward the child frequently.
- Do not interrupt the child or rush the child.
- Do not pressure or demand the child to talk.
- Read simple stories, stressing sequence.
- Describe events in stories, using visual clues.
- Name and label objects.
- Associate words with objects.
- Provide repetition to help the child remember and learn new words.
- Limit the number of decisions the child has to make.
- Praise the child for correct responses.

What can I do for children with behavioral problems?

Good child care practices and techniques that are effective with nondisabled children will also be effective for children with behavior problems. Some suggested techniques for avoiding and handling behavioral problems include:

- Structure the environment for behavioral success.
- Maintain consistent rules and discipline.
- Communicate and coordinate with other caregivers for consistency.
- Keep activities structured and well planned.
- Provide stability. Be fair, firm and consistent.
- Maintain a full schedule of activities.
- Eliminate distractions and keep activities reasonably quiet.
- Be aware of your body language, tone of voice and eye contact.
- Communicate clearly. Use language the child can understand.
- Let children know your expectations; tell children what to do instead of what not to do.
- Use positive, firm, supportive language.
- Do not lecture.
- Watch how the child waits to take his turn, plays with others and interacts in a group.
- Intervene early before conflict occurs.
- Control the child's behavior by staying nearby.
- Gently put your hand on child's shoulder, arm, etc.
- Obtain and maintain eye contact.
- Ask the child and the family about the child's likes and dislikes.
- Give the child a choice of reinforcers when possible. Let the child know what he or she is working for.
- Teach social interaction skills.
- Get the child involved in groups that accept different behaviors.
- Use stories, dramatic play and puppets to teach ways to express positive and negative feelings.
- Use punching bags or play dough to allow release of aggressive feelings.
- Use water, sand play, or finger painting to relax a tense child.
- Use special resources, including reduced class size, classroom aides and one-on-one instruction.
- Give positive reinforcement—verbal praise, eye contact and physical contact.
- Give four positive statements for every negative or corrective statement you say.
- Inform the child's parents of positive behaviors on a regular basis.
- Demonstrate that you accept the child. Work to build trust.

What can I do for children with hearing impairments?

Ensuring that you communicate clearly is important for all children in your care regardless of whether they have disabilities. For effective communication with children who are deaf or hard of hearing, implement these suggested practices:

- Let the child initiate communication. Wait, observe and listen for pointing, eye gazing, gestures, grunts, crying—all have meaning.
- Talk distinctly and be sure the child can see your face.
- Be at same physical level to talk—down on the floor. This provides visual clues, making you more aware of non-verbal and verbal initiations.
- Follow the child's lead. Do what the child does; communicate what he or she needs.
- Imitate. Show the child you are interested in what is being said and encourage him or her to imitate you.
- Look directly at the child when you are speaking, and speak clearly. Use correct sounds and words.
- Use gestures.
- Use sign language. (Learning sign can be a fun activity for all the children, particularly when done as part of their music time. Consult a local disability organization for help in locating a resource person who can assist with this.)
- Be sure to have adequate lighting.
- Use objects, pictures, gestures, or other visual clues with all instructions.
- Use color codes and pictures instead of words.
- Repeat instructions. Tell them, show them, and then tell them again.
- Write key words and short sentences.
- Encourage communication by choosing activities that facilitate language.
- Provide different ways of learning the same information.
- Seat the child close to the teacher for circle activities.
- Avoid extra background noises when you are doing activities.

What can I do for children with visual impairments?

To include children who have visual impairments, implement these suggested practices:

- Use large print and Braille in signs.
- Have large print books, pop up books and other materials available.
- Provide Braille materials.
- Keep pathways clear of obstructions.
- Leave furniture and/or equipment in the same place at all times so these children can more easily move about.
- Describe activities.
- Use string around the classroom to make a path for the child to hold on to.
- Provide toys with textures — soft, hard, fuzzy, or rough.
- Provide toys with sound — loud, soft, squeaky, jingling.
- Use finger paints, play-dough and clay to stimulate touch.

What can I do for children with infectious diseases, including colds and HIV?

To include children who are infected with the HIV virus or other infectious diseases, implement these suggested practices:

- Follow careful precautions when cleaning or diapering the child.
- Use gloves when in contact with blood or body fluids, diapering the child, changing bandages or cleaning up vomit.
- Disinfect toys which have been used by a bleeding child immediately.
- Use disinfectant to wash toys in infant and toddler programs, daily.
- Dispose of used tissues immediately.
- Wash hands immediately after helping children wipe running noses.
- Ensure all children wash hands before all meals and snacks, after using the restroom and after playing outdoors.
- Implement strict hand and toy washing procedures to protect all staff and children from HIV and other infectious diseases.

NOTE

- *You cannot get the HIV virus from wiping a running nose — unless there is blood present — and you don't have to institute any special toy washing procedure except where the child is bleeding. These policies may be worthwhile in preventing other infectious diseases.*

What can I do for children who have physical disabilities?

To include children with different physical abilities, implement these suggested practices:

- Know the child's physical abilities and limitations.
- Check with parents for any special handling needs and to see if adaptive equipment is needed.
- Make sure rooms are well lit.
- Arrange rooms with adequate open space between furniture for wheelchairs or crutches.
- Provide rails or ramps where you have steps.
- Always show and tell the child when you move furniture.
- Avoid putting many small objects on the floor.
- Give the child extra time in play activities to learn balance and coordination.
- Provide activities that use all parts of the body (hands, feet, back).
- Encourage use of hands—using large peg boards, large inter-locking block-type games, busy boxes and play dough.
- Give the child as many life experiences as possible, such as handling animals, taking field trips and working in different media.
- Promote group play with puppets and dress-up clothes.
- Provide seating arrangements to enable the child to be a part of the group.
- Adapt outdoor activities such as sand piles, water tables and arts and crafts tables.
- Make sure all toys and equipment are accessible. You may need to put toys and equipment on a low table or on the floor.
- Make simple adaptations to equipment. (For example, tape a large marble to a cookie cutter to make it possible for a child with limited use of his/her hands to join the other children in making cookies or playing with clay.)
- Provide large pencils and easy-grip scissors.
- Provide soft toys.
- Use materials with different textures.
- Provide extra nap time if needed.
- Provide shorter days or alternate day schedules, if needed.
- Adjust the length of activity periods, if needed.
- Adjust snack and meal schedules, if needed.
- Use adaptive equipment to help with eating, if needed.
- Provide large utensils, if needed.
- Have foam pads available.
- Use standers and bean bag chairs.
- Use other adaptive equipment to help support a child who needs help in sitting upright.
- Lift or carry the child, if necessary.

NOTE

- *Not all children can get out of their wheelchairs to reach toys put on the floor. A low table will work better for some children.*

What steps can I take to make my center comply with the ADA?

Evaluate your building and facilities for ease of access. Remove barriers where it is readily achievable to do so. Where barrier removal is not readily achievable, find an alternative method of providing a given service to children with disabilities.

Please keep in mind that the ADA says you are not required to meet the specifications outlined below if you can show that doing so is not "readily achievable."

Some forms of barrier removal are listed below. Refer to the ADA Accessibility Guidelines (ADAAG) for specifications.

Specific standards for children's environments will be issued by the U.S. Architectural and Transportation Barriers Compliance Board (Access Board). Contact the Access Board for updated information on the status of these guidelines (see Chapter 5) at the back of this guide. Various states, such as Texas and Florida, also have specific standards for children's environments.

Entrances and exits

- Make sure your parking lot and pathway have a stable, firm, slip-resistant surface. (ADAAG 4.5.1)
- If you provide any parking, provide at least one 8' wide parking space with an 5' aisle close to the entrance to accommodate a lift-equipped van. (ADAAG 4.6.3)
- Establish policies and post signs to ensure accessible parking is used only by those who need it. (ADAAG 4.6.4)
- If the entrance to your facility has steps, install a stable, firm, non-slip ramp of at least 36" wide with handrails and with a slope as follows: (ADAAG 4.8)

Vertical Rise	Maximum Slope
Up to 3 inches	1:8 to 1:10 *
Up to 6 inches	1:10 to 1:12
More than 6 inches	1:12

- If the ramp is longer than 6', install handrails on both sides of the ramp. (ADAAG 4.8.5)
- Make sure at least 50 percent of your facility's entrances are accessible. (ADAAG 4.1.3 (8)(a)(i))
- Provide an entrance door opening that is at least 32" wide with 18" of clear wall space next to the handle on the pull side of the door. (ADAAG 4.13.6)
- Make sure the door handles can be operated with limited use of hands.
- Make sure the entrance door threshold is 1/2" high or less and, if over 1/4", is beveled to make it easier to roll over. Thresholds for sliding glass doors may be as high as 3/4". (ADAAG 4.13.8)

Access to activity areas

- Provide pathways that are free of stairs. Be sure ramps are in place and conform to specifications as mentioned above.
- Provide pathways at least 36" wide. (ADAAG 4.3.3)
- Provide clear areas for children using wheelchairs to turn around. (ADAAG 4.5.1)
- Make sure the playground is accessible to children with physical disabilities who use a wheelchair, leg braces or crutches. (ADAAG 4.3)

* 1" of vertical rise for 8" to 10" of horizontal distance.

- Make sure the surfaces of pathways from the building to the play area and in the play area itself are stable, firm and non-slip unless this would be a fundamental alteration of the area. (e.g. a sandbox) (ADAAG 4.5.1)
- Ensure that all play equipment is safe for use by all children, both those with and without disabilities.
- Provide adequate support to enable children with disabilities to participate with all other children.

When it is not readily achievable to remove barriers to the playground, or in cases where legitimate safety concerns exist, ensure that a variety of safe outdoor activities and materials are available—such as sand piles, garden areas, table games and art area—in addition to the standard playground equipment. These alternate activities should be available for use by all children, not just those with disabilities.

Restrooms

- Make sure the door opening is at least 32" wide. (ADAAG 4.22.2)
- Make sure the pathway to all fixtures is 36" wide. (ADAAG 4.3.3)
- If stalls are provided, make sure at least one stall is accessible. (ADAAG 4.22.4)
- Provide grab bars behind and on the side wall nearest the toilet.
- Provide a sink with 30" x 48" clear floor space in front or alongside. (ADAAG 4.19.3)

Drinking fountain

- Provide a pathway to the fountain that is at least 36" wide. (ADAAG 4.3.3)
- Provide floor space of at least 30" x 48" in front of the fountain. (ADAAG 4.15.5)
- Make sure the spout is positioned no more than 32" from the floor.
- Mount the controls on the front or on the side near the front. Make sure they are easy to operate without tight grasping, pinching, stretching or twisting of the wrist. (ADAAG 4.15.4)
- If making the fountain accessible by moving the fixture is not readily achievable, provide a cup dispenser or water cooler in an accessible location.

Emergency signals

- Where systems are provided, install sound and flashing light alarm systems to signal an emergency. If installation is not readily achievable, see that alternate measures are in place. (ADAAG 4.1.3(14))

EXAMPLE

- *Have your staff signal emergencies by flashing lights off and on.*
- *Establish a plan of action for the safe evacuation of all children.*
- *Designate specific staff members and backup staff to be responsible for evacuating children with disabilities.*

What steps can I take to make sure my vehicles comply?

If your center offers transportation services, remove barriers to the extent it is readily achievable to do so. All other provisions of Title III also apply, such as making reasonable modifications and providing auxiliary aids and services.

Title III does not require that you install lifts in existing vehicles, but you must remove barriers where it is easy and inexpensive to do so.

EXAMPLE

- *An existing vehicle does not have a lift. Staff are trained in how to safely transfer a child who uses a wheelchair from the chair into the van or car. Provision is made to transport the chair in the same vehicle or an additional vehicle.*

Can I recover any expenses I incur by complying with this law?

Surcharges

Child care and family child care homes *cannot charge a higher rate* to a person with a disability or their family to cover expenses incurred in providing accommodations in compliance with the ADA. If a center or home is required to increase fees to cover any expenses which may be necessary to accept a child with a disability, the fee increase must apply to *all* families.

Are there tax provisions to relieve me of part of these expenses?

Disability-related tax provisions can help businesses comply with the ADA. If certain criteria are met, your business may take the following tax credits or deductions for certain expenses associated with accommodating children, parents and members of the public with disabilities.

Disabled access credit

This is available only to eligible small businesses. A small business qualifies if

- gross earnings for the preceding tax year did not exceed $1,000,000,

OR

- the business employed 30 or fewer full-time workers during the preceding tax year. (Employees are considered full-time if employed at least 30 hours per week for 20 or more calendar weeks in the taxable year.)

Tax credits for expenditures: Eligible businesses may claim an annual tax credit equal to 50 percent of annual "eligible access expenditures" between $250 and $10,250 to cover expenses incurred in making their facilities and programs accessible to individuals with disabilities. The maximum credit for any one year is $5,000. It does *not* apply to costs for new construction.

Eligible access expenditures: Reasonable and necessary expenditures made for the following purposes are considered "eligible access expenditures":

- Removing architectural, communication, physical or transportation barriers which prevent a business from being accessible

- Providing qualified interpreters or other effective methods to make audio materials available to individuals with hearing impairments
- Providing qualified readers, taped texts and other effective methods of making visually delivered materials available to individuals with visual impairments
- Acquiring or modifying equipment and devices for people with disabilities
- Providing other similar services, modifications, materials or equipment

Tax deductions for removal of barriers

This is available to all businesses regardless of size. The Internal Revenue Service offers a $15,000 tax deduction for expenses incurred from making a child care center or family child care home accessible to children, parents and members of the public with disabilities. Also, deductions may be taken for expenses incurred from making a business vehicle accessible for transporting children with disabilities.

Tax deductions may be taken by:

- Individual taxpayers
- Partnerships (including individual partners)

Maximum deduction: $15,000 (reduced from $35,000 effective January 1991)

Deductible expenses: Removal of barriers must meet IRS and ADA Accessibility Guidelines and must qualify as deductible expenses. Deductible expenses include the following:

- walks
- stairs
- parking lots
- floors
- ramps
- toilet rooms
- entrances
- water fountains
- doors/doorways
- public telephones
- elevators
- warning signals
- controls
- rail facilities
- markings
- buses
- vehicles
- rapid & light rail systems

In general, expenses of removing a barrier not covered above must meet the following requirements:

- Pose a barrier to access or use of a facility or public transportation vehicle by a person with a disability
- Affect at least one major class of people with disabilities (such as people who are blind or use a wheelchair)
- Can be removed without creating new barriers

Will my insurance coverage be affected?

At present, no one is sure how compliance with the ADA will affect insurance coverage of child care centers and family child care homes. Nevertheless, the ADA makes it illegal for a child care center or family child care home to turn away a child or parent with a disability because of limitations on insurance coverage or because of insurance rates. However, it may be possible in some instances for a center to exclude a child from certain activities on the basis of legitimate safety concerns. These concerns must be based on real risks, not on speculation, stereotypes or generalizations.

The ADA does not make it illegal for insurance companies to cancel or not renew liability insurance on centers or homes which serve a child with a disability. However, a cancellation or non-renewal *must be based on actuarial or other data* and not solely on the presence of a child with a disability. The law does permit removal of coverage based upon genuine safety concerns and classification of risks based upon legitimate actuarial considerations.

Although the law does not require a copy of actuarial data, some states require the insurers to file the information with their state regulatory agencies. **Should a change in your insurance policy occur, contact the regulatory agency in your state for information and assistance.**

I'm overwhelmed! How can I do all this?

Steps toward compliance

The first and most important step toward compliance is to examine your attitudes toward people with disabilities. Your acceptance of the right of people with disabilities to participate with all others in the mainstream of life will enable you to discover hundreds of simple ways to include them in your child care center!

Many child care centers have been successful in offering their services to children and parents with disabilities. Some of these centers are listed in Chapter 5. Contact centers in your state to learn what steps they have taken to achieve their success. Turn also to any of the many other organizations listed in Chapter 5 for suggestions and information. You may also discover other resources in your community that can help you in this process.

INCLUDING CHILDREN WITH DISABILITIES: STEPS TO SUCCESS

Importance of Inclusion

All children are special and have unique needs whether they do or do not have a disability. Because of stereotyping, most people don't realize that children with disabilities may be as different from each other as they are from children without disabilities. Including all kinds of children in child care and school settings encourages the celebration of these individual differences. Similarly, diversity in children's abilities and backgrounds enhances and enriches their learning experiences. A nurturing environment provides all children with opportunities to explore and develop their unique abilities and gifts.

What are the benefits of including children?

All children, families and caregivers benefit when children with disabilities are cared for in typical child care environments.

Benefit of inclusion for children with or without disabilities

- *Make friends.*
- *Learn by modeling others.*
- *Show more pride in their achievements.*
- *Build interdependence and ability to deal with obstacles.*
- *Notice how they are similar.*
- *Develop better language and communications skills.*
- *Develop interpersonal skills.*
- *Demonstrate better problem-solving ability.*
- *Learn to become more assertive.*
- *Learn self-respect by being a part of a positive, normal environment.*
- *Learn to accept others as they are.*
- *Develop patience and compassion.*
- *Learn to accept their own strengths and needs.*
- *Accept each other as people, not as a label.*
- *Learn to help others.*

Benefit of inclusion for families

- *Enable parents to work because they have access to inclusive child care services.*
- *Understand that all children have negative behaviors such as tantrums or toilet problems.*
- *Discover ways to include children with diverse abilities and interests.*
- *Learn to relax and take a break from their children.*
- *Discover that others can provide a secure and nurturing environment for their children.*
- *Learn to accept their own child's strengths and needs.*
- *Share common experiences.*
- *Feel a kinship with other parents.*

Benefit of inclusion for child care providers

- *Develop networks of professional services and community resources.*
- *Expand their knowledge about disabilities.*
- *Develop an awareness that* all *people have unique needs.*
- *Create an enriched setting to encourage understanding and flexibility in including children with disabilities.*
- *Realize and appreciate differences.*
- *Develop compassion, kindness and respect for others.*
- *Acquire a larger share of the market by enhancing their center's image.*
- *Take advantage of potential tax credits/deductions.*

PEOPLE-FIRST LANGUAGE

Do not refer to a child's disability unless it is relevant.

❧

Use "disability" rather than "handicap" to refer to a child's disability.

❧

When referring to a child's disability, use people-first language. Say "child with mental retardation" rather than "a mentally retarded child."

❧

Avoid referring to children with disabilities as "the disabled," "the deaf," "epileptics, " "the retarded," "a quadriplegic."

❧

Avoid negative or sensational descriptions of a child's disability.

❧

Don't portray children with disabilities as overly courageous, brave, special or superhuman.

❧

Don't use "normal" to describe children without disabilities, instead say "children without disabilities" if comparisons are necessary.

❧

Never say "wheelchair bound" or "confined to a wheelchair"; instead say "uses a wheelchair." Mobility or adaptive equipment affords freedom and access.

❧

Never assume that a child with a communication disorder (speech impediment, hearing loss, motor impairment) also has a cognitive disability such as mental retardation.

These guidelines are excerpts from the pamphlet "Talking About Disability: A Guide to Using Appropriate Language". For free copies, write or call:
Coalition for Tennesseans with Disabilities, 2416 21st Avenue, Suite 206
Nashville, TN 37212
(615) 292-1740

STEPS TO SUCCESSFUL INCLUSION

STEP 1

Provide a quality child care program

A quality child care center reflects a professional, concerned environment for the care of young children. Cleanliness, well-organized classrooms, nutritious food, positive staff-child interactions, on-going staff training, and low staff turnover all contribute to the quality of your center. Three professional organizations have established standards to measure your center's effectiveness, NAEYC, NCCA and NAFDC.

The National Association for the Education of Young Children (NAEYC), the nation's largest organization of early childhood professionals, sponsors an accreditation program by which child care centers voluntarily meet higher quality standards than required by law. Accredited programs evaluate every aspect of their own operation and then initiate improvements as needed to increase overall quality. Once all changes are in place, quality is verified by an on-site visit by a trained professional. Although the accreditation process addresses every aspect of the program, particular emphasis is placed on the quality of interactions between the staff and children, and the developmental appropriateness of the curriculum.

For more information about accreditation contact:
National Academy of Early Childhood Programs/ NAEYC
1509 16th Street, N.W.
Washington, D.C. 20036
202-232-8777 800-424-2460

The National Child Care Association (NCCA) is also dedicated to ensuring quality child care for young children. NCCA is a professional trade association representing a membership of close to 4,500 licensed private child care centers. NCCA recognizes child care providers who demonstrate the highest standards of excellence by awarding a national credential, the Certified Child Care Professional (CCP) Early Childhood Education Specialist.

For more information contact:
National Child Care Association, Inc.
1029 Railroad Street, N.W.
Conyers (Atlanta), Georgia 30207-5275
800-543-7161

The National Association of Family Day Care (NAFDC) offers accreditation to family child care and group homes that meet high quality standards. NAFDC looks at seven dimensions of family child care: indoor safety, health, nutrition, interaction, indoor play environment, outdoor play environment, and professional responsibility.

Providers, parents, and a representative of NAFDC evaluate the program to determine how well it meets the identified quality standards in family child care homes. To be eligible for NAFDC accreditation, a provider must meet local licensing standards, be an NAFDC member, have been in business for at least 18 months and meet requirement standards.

For more information contact:
National Association for Family Day Care
725 15th Street, N.W., Suite 505
Washington, D.C. 20005
800-358-3817

STEP 2

Provide a positive attitude

An essential ingredient for inclusive child care is an attitude that children with disabilities are children first and foremost.

However, past practices of isolating and protecting children with disabilities may have influenced your own or your staff's attitudes. Your staff, like most people in society, may have had little opportunity to interact with people with disabilities. Members of your staff may feel they do not have the patience or special training to care for children with disabilities. When staff members are asked to care for a child with special needs, they may express negative feelings. They may feel insecure and resentful that they already have more than they can handle.

In addition, many individuals do not adjust readily to change. Routines become comfortable, something we know and have learned to handle—both the positive and the negative aspects. Given a choice, most of us will choose, consciously or unconsciously, the status quo. Although your staff may have no real choice about whether or not to change, they do have choices about how to engage in and respond to change.

To help your staff adjust to change and develop positive attitudes about caring for children with disabilities:

- *let them talk about their feelings,*
- *give them time to adjust to the changes,*
- *let them meet some children and adults with disabilities, and*
- *provide training and support to ensure they have the necessary skills and knowledge.*

Sometimes attitude changes happen after practices have changed. A caregiver who was totally opposed to caring for a child with a disability may, after a few months, become a vocal advocate for that child and others.

> *"Inclusion has provided normal role models for my child. I wanted my son to see children walking, jumping, talking with each other—so he'd start doing these things. I also felt my son had something to share with the kids in his class—his charms, his playfulness and the fact that his disability has very little to do with who he is."*
>
> **Bess Authaus Graham,**
> parent of a child with a disability

STEP 3

Find high quality training for your staff

Training your child care providers is the key to improving the quality of their performance and thus the quality of your center. Training will add to your staff's sense of professionalism, enhance their care-giving skills, build them into a team with common goals, and, generally, improve their morale.

Staff training can be done in a variety of ways, both formally and informally through:

- *visiting other inclusive programs or special education classes.*
- *lectures and discussions with specialists, such as therapists, nonprofit groups for people with disabilities, and community resources for families.*
- *discussion sessions with parents, in which parents train staff as to the needs of their children.*
- *workshops on curriculum, equipment and materials.*
- *slide programs and videos.*
- *special community or senior-level college courses outside the center.*
- *books, magazines and journals.*

The Child Development Associate National Credentialing Program has developed The Child Development Associate (CDA) competency standards to support quality programs for preschool children in training, evaluation, and professional recognition of child care providers.

For more information contact:
CDA National Credentialing Program
1341 G Street, N.W
Washington, D.C. 20005
800-424-4310

The Child Care Development Block Grant Program is a source of funds for states to improve the quality, affordability and availability of child care. A portion of the grant money is made available to each state for training of child care providers. Call the agency in your state which oversees health and human services for more information about this program.

The best way to determine what training your staff needs is to ask them!

What child care providers say they need

Child care providers indicate they need the following in order to care for children with disabilities:

- *Help understanding their feelings about caring for children with special needs.*
- *Help identifying the special needs of each child.*
- *Help developing ways to communicate and work with parents.*
- *Help locating and using community resources.*
- *Help making creative accommodations for all children.*

STEP 4

Work with families of children with disabilities

The best way to learn about a child with a disability is to ask his or her parents. They are the experts in caring for the child and meeting his or her needs. When a child with a disability is born, most parents have had no specialized knowledge or training. However, months and years of experience, have taught most parents a great deal.

Collaborate with parents and confer with them often. Let them know that their help is essential to provide quality care for their child. Invite them to teach specific skills to the child care staff to ensure the individualized care their child may need.

Use the same on-going communication methods with parents of a child with a disability as you use with all families. Encourage families to visit the center at any time. If problems arise, work with the family, teachers and therapists to solve them.

Families of children with disabilities experience the same joys and problems as all families do. However, their families may face even more problems or time constraints. Locating the necessary resources in the community can be difficult. Increasing the awareness and sensitivity of your center's staff will help to meet both the parents and the child's needs.

What to ask parents of a child with a disability

Questions asked of a parent of a child with a disability are not much different from ones asked of a parent of a nondisabled child. However, below are extra questions you may find helpful.

1. What type of care do parents expect? Some children attending special education programs are placed in groups of 8 to 10 children. The parents may not have experienced a child care setting where their child is one of 20 or 25.

2. What does the child like or enjoy? (List things children do in a daily routine, asking if their child likes or enjoys each one.)

3. What are the child's favorite toys, games, activities?

4. How do the parent(s) adapt activities and equipment at home?

5. What skills has the child mastered?

6. What are the toileting skills of any child over two years old? Many children with developmental disabilities take a long time to master this skill independently.

7. What special considerations and accommodations and/or assistance does the family provide the child at home (particularly children with certain orthopedic disabilities)?

8. What makes him/her laugh? What is s/he proud of? What is s/he afraid of? Curious about? What frustrates him/her? How does s/he react to frustration?

9. How does the child interact with babies, younger children, peers and older children? Has the child been around infants before?

10. What is the child's history with medication, allergies and seizures? Be sure to ask why the medication has been prescribed, when it is administered (during child care hours), and what feedback, if any, parents would find helpful from care givers.

11. Does the child use adaptive equipment such as a nebulizer for breathing treatments, hearing aid, walker or potty chair? Most parents can show the provider how to use the equipment.

12. How does s/he function in situations with other children?

13. What does their child do when they are unavailable, such as when the parents are in the bathroom?

14. Who does their child play with most? Same age? Younger? Older?

15. How do they shape their child's behavior?

> *"Why Integrate? So children with disabilities have the same wealth of experiences as other children . . . go on the same field trips to the zoo, play on the playground, make the same silly art activities and listen to the same stories."*
>
> **Linda Luduena**, *Teacher*
> Center for Health Care Services

> *"We have integrated a child with needs into our center. We have allowed her to educate us as we educate her. It was a fearful experience because we were not sure that we could meet her needs. It has been an eye opening experience to know that we have been able to take Mandy and make her a part of our family. And all because we decided that our heart would guide us in the right direction."*
>
> **Sylvia J. De La Peña**, *Director*
> Wesley Child Development

STEP 5

Build professional support for your child care providers

Inclusion of a child with disabilities works best when a team supports the child care providers to plan and solve problems on a regular basis.

The team should be diverse and include parents and other interested family members, other staff at the child care center and any therapists or specialists who are providing services to the child. Many children with disabilities receive therapeutic and/or education services from school districts and/or other agencies. Always ask the parent's permission to contact any private therapist, teacher or medical specialist serving the child.

In the past, specialists worked directly with the child; however, more and more, therapists and other specialists are working with the parents and child care providers, training them to work with the child. Specialists can provide specific training, such as how to help a child learn to crawl or walk, or more general skills, such as how to help a child learn to talk.

Ask the therapists and teachers who work with the child to be a part of the child's team. Ask them to provide training to your staff and attend meetings to plan the best ways to meet the child's needs at the child care program.

Most states now provide educational, physical, occupational and/or speech therapy for children with disabilities or developmental delays. Children may be eligible if they have a significant developmental delay in one or more of the following areas: cognitive, gross or fine motor, language or speech, social or emotional, and self-help skills. Children with atypical behavior or with developmental delay, such as Down Syndrome, cerebral palsy or spina bifida, may also be eligible.

Services for children and families may include: screening and assessments; physical, occupational, speech and language therapy; activities to develop cognitive and self-help (adaptive) skills; adaptive equipment; and transportation.

Sponsoring agencies, services provided, amount of funding and philosophical orientation of early childhood intervention and special educational services for preschoolers and special education services for school age children may vary from state to state. Ask parents what therapeutic and educational services the child receives and request permission to contact them and include them in the child care service.

If families are not receiving services and you suspect the child may be eligible for specialized services, ask the parent's permission to make a referral. See Step 6 for suggestions on how to do this.

What child care providers should expect from early childhood intervention or special education service providers

(With the family's consent.)

1. A summary of the assessment data.
2. A copy of the Individualized Family Service Plan (IFSP) or Individualized Educational Plan (IEP).
3. Technical assistance and consultation from the special educators and therapists that serve the child.
4. Open lines of communication.
5. A statement of condition and a description of any special medical needs from physicians and therapists.

Additionally, child care providers should request:

6. Training for your staff.
7. Loan of adaptive equipment.
8. On-site consultative therapy (related services) so child care providers can reinforce what happens at school and at home.
9. Behavior management training, if needed.
10. Specialized instruction in sign language or other services, if needed.

> *"Children are children, first and foremost! Children accept you as you are! Why segregate a child just because of the disability? Who is afraid or uncomfortable because of it, not the child or the other children."*
>
> **Sherry M. Duff,**
> Project GROW

> *"Entering the 21st century we must all surely realize that segregation of any segment of society simply does not work. All children truly do deserve to be included. Children with disabilities can now have as bright a future as any other child, a future with a 'life in the neighborhood' with a job, friends and hope."*
>
> **Ann Hardie,**
> Infant Parent Program

STEP 6

Develop specific procedures to screen and refer a child that has not yet been recognized by his/her parents or medical provider

All child care programs need to develop specific procedures to screen and refer a child who might benefit from specialized help.

Screening merely means observing a child to see if they have any problems and may need to be referred for professional assessment. Screening is important because it may lead to a child and family receiving help. The earlier the help, the better the chance the child will benefit.

Most screening in child care centers and family child care homes is done informally through observation. The child care providers simply notice that the child does not do things as quickly, or as well, or in a similar manner as other children his/her age.

Some centers use a developmental checklist to organize the provider's observations and record the results. Others record anecdotal information.

Other programs have set up more formalized screening programs by contacting their local health department or some other agency and arranging medical, hearing, visual and developmental screenings for all children.

Keep all parents well informed about any screenings by telling them:

- *What is involved in the screening program.*
- *Why it is important to screen their child.*
- *When the screening will take place.*
- *What results from the screening were obtained.*

If after formal or informal screening of a child, you believe the child would benefit from specialized help follow the following procedures:

1. Always have a clear reason for suggesting a referral based upon results of either formal or informal screenings.
2. Consider the cultural background and experience of the child and family in assessing the accuracy of the screening results.
3. Consult with the child's parents about specific concerns for the child's cognitive, social and or physical progress.
4. Ask the parents if they have considered specialized services for their child. Some parents do not want to have their child labeled at such an early age. Other parents may not be ready to acknowledge that their child may have some developmental delays. Still others will share your concern and be eager to seek assistance. Never make a referral without the family's permission.
5. If the family is ready to make a referral, help them locate the appropriate agency.
6. Referral to specialized services usually involves a great deal of paperwork. You may need to help the parents sign releases and complete referral forms or other paperwork.
7. Continue to follow up with the family to ensure that they are getting the services needed.
8. If the child is eligible for specialized services, ask the parent's permission to coordinate your services with the new agency.

STEP 7

Look for creative ways to gain extra staff to reduce the child/staff ratio in the classroom

You can add quantity and quality to your program without extra expense. Some places to look for extra help include:

- *Parents, grandparents or siblings of any of the children in your program*
- *Student teachers from local colleges, community colleges and universities*
- *Interns or students doing field placements or internships from school of social work, sociology, psychology, nursing, medicine, physical or occupational therapy*
- *High school students enrolled in child development, work study programs or community action clubs*
- *Foster grandparents or other retired people (Write the Older Americans Program, Domestic and Anti-Poverty Operations, ACTION, 806 Connecticut Ave., N.W., Washington, D.C. 20525 to learn about the federal Foster Grandparents program.)*

STEP 8

Let the community know that inclusion works

Here are several suggestions about how to make people aware of the ability of your program to adapt to the needs of every child.

- *Contact your local chapter of The Arc and other disability organizations in your area. Call The Arc national headquarters or your local United Way for help in making contact with local groups.*
- *Collaborate with other centers to offer a tour of programs to community leaders and/or press.*
- *Organize regular meetings for parents to provide more information exchange.*
- *Offer information to parents at your center about other child-related conferences and workshops.*
- *Conduct an annual open house to showcase your program to both families and the community*
- *Cultivate television/radio/newspaper reporters who might need seasonal stories, and offer your center for photos at holidays to the press.*
- *Many areas have formed inclusive child care networks. Get together with these providers to share ideas and provide or receive training. If there is not a group in your area—start one!*

SPECIFIC SCENARIOS OF CHILDREN WITH DISABILITIES

José

No magical formula exists to accommodate children with disabilities in child care centers. Each child should be viewed as a unique individual and his/her needs accommodated. The following section addresses several specific children and their experiences in child care. These may provide some ideas to you as families request care in your center.

José, an active boy of three, loves to watch Big Bird on *Sesame Street*. He lives with his mother and two older sisters who pamper him. He likes books, coloring, playing with blocks, and eating chocolate chip cookies. Most of all he enjoys swinging and sliding outdoors. José has a hard time getting up in the morning and does not like to go to the bathroom. He is potty trained, but sometimes needs coaching.

José attends an early childhood special education class each morning at his neighborhood school. And because his mother works, he is enrolled for afternoon care at Little Dudes Child Care Center. He also receives private speech therapy two afternoons a week.

José enjoys playing and is affectionate with other children. He is able to perform most activities at school; however, he becomes frustrated when dealing with many things at one time. José talks a lot, but many words are unclear. He may not follow complex directions.

His mother and older sisters work with him at home, reading to him and implementing activities suggested by the speech therapist and special education teacher. They use some signs, picture cards, and songs to help him learn.

José has Down syndrome.

Accommodations for José

José's mother had no trouble finding child care. Little Dudes, a private center, accepted him with "open arms." Little Dudes is in a yellow school house located just outside the city limits, set in pasture land where cows and sheep graze nearby. Little Dudes cares for 132 children from the ages of 18 months to 11 years.

The center has had to make very few accommodations specifically for José. Most accommodations are simply good practice, tailoring the program to meet the needs of all children. José's teacher makes a point of including José in *all* activities, which has caused absolutely no difficulties for her or the other children.

To include José, Little Dudes child care center has made these accommodations: ☞

INCLUSION PLAN

Physical: *None needed.*

Programmatic:

- *Sesame Street materials are available.*
- *Books about real-life stories with clear, non-abstract pictures are provided.*
- *José is paired with a buddy when going to the bathroom.*
- *Pictures of Big Bird and other Sesame Street items, such as soap, are placed in the bathroom to motivate José.*
- *Staff members ask José's family to teach them the meanings of the sounds and gestures he uses.*
- *The speech pathologist has taught the child care staff some basic signs.*
- *The child care provider consults by phone with the special education teacher, as needed.*

Mental Retardation

The technical definition of mental retardation describes a person as having:

> *substantial limitations in present functioning. It is characterized by significantly subaverage intellectual functioning, existing concurrently with related limitations in two or more of the following applicable adaptive skill areas: communication, self-care, home living, social skills, community use, self-direction, health and safety, functional academics, leisure, and work. Mental retardation manifests before age 18.*

Basically, children with mental retardation do not learn as quickly as other children their age. These children have a below average intelligence and may also develop more slowly than other children in the areas of physical growth, social maturity, emotional display, self-care, and communication. A five year old may not have all the abilities as other five year olds; but, it is important for the child to interact with children of the same chronological age so he or she can learn typical language and behaviors.

Mental retardation should *not* be confused with mental illness. Mental retardation is not a disease; it is a condition which may prevent a child from learning and responding to the environment as quickly as his or her peers.

Mental retardation can be caused by any condition which impairs development of the brain before birth, during birth, or in early childhood. Common causes include infections or substance abuse during pregnancy, abnormal delivery, infectious illness in infancy, toxic agents, metabolic disorders, Rh blood factor incompatibility, physical malformations and genetic disorders.

A child that has Down syndrome, Rett syndrome, Fragile-X syndrome, or Fetal alcohol syndrome may also have mental retardation.

Eric

At the age of four, Eric loves to ride on the tractor with his Papa at the farm and goes on family outings with his mom, dad and older sister.

Eric likes looking at books; although he becomes frustrated when he is unable to get a book off the shelf. Eric also enjoys playing with "Hot Wheels," but cannot get from his wheelchair to the floor by himself. He needs assistance with sitting and walking, but can crawl all around the house and classroom.

At lunch time, Eric needs help with eating. He uses a special adaptive chair with a table top. Avoid brussels spouts!—he does not like them. Also, he is not yet potty trained, so his diaper needs changing regularly.

Eric, who has a physical disability, needs assistance each morning from his parents with dressing and getting ready to catch the school bus. He is enrolled in a segregated early childhood special education program at a public elementary school. In the afternoon, he rides the bus to the Children's Green House YMCA, a typical child care center. At the Green House, Eric has a new best friend; her name is Jennifer. She likes to finger paint and play in the sandbox with Eric. Jennifer's mom is proud of Jennifer and Eric's friendship.

Accommodations for Eric

Eric's mother had a difficult time finding a child care center which would accept her child until she located the Children's Green House YMCA, a nonprofit organization, partly supported by the United Way. Of the 99 children enrolled at the Children's Green House, Eric is the only one with a disability.

To include Eric, the Children's Green House has made these accommodations: ☞

INCLUSION PLAN

Physical:

- *Ramps installed to accommodate Eric's wheelchair.*
- *Furniture remains in the same place.*
- *Clear pathways and smooth surfaces provide space so Eric can crawl to activity centers.*
- *Materials and tools remain at lower levels in activity centers.*
- *Books placed so Eric can reach them.*
- *The teacher holds Eric in her lap or puts him in a bean bag chair during some indoor activities.*
- *For outdoor activities, Eric plays on a blanket so he can watch or rides in his wheelchair to the playground equipment where the other children play with him.*
- *The staff help Eric get from his wheelchair to the floor.*
- *Special adaptive equipment borrowed from home, such a as chair with a table top.*
- *Eric's parents provide instructions about his eating habits.*

Programmatic:

- *Children are no longer required to be potty trained as a condition for enrollment.*
- *Activities that build motor skills by using arm movements are used instead of activities that involve sitting down and standing up.*
- *The staff rely on natural gestures for communicating.*
- *Lunch and snacks feature finger foods.*
- *The center and family are trying to get a computer donated to the child care center.*

Physical Disability

Physical disabilities often result from illness or accident before, during or after birth and can affect any part of the body. Because young children learn about the world by physically exploring their surroundings (through touching, crawling and walking) physical problems may interfere with other areas of the child's development (motor, communication, learning and social). Children with physical disabilities may be dependent upon others to help them explore their environment, which may lead to emotional dependencies and frustration.
Technology and adaptive equipment can help children with physical disabilities do things they are not able to do on their own. For example, computerized devices can help them communicate and wheelchairs help them move freely on their own.

Some of the causes of physical disabilities are:

- *Cerebral Palsy*
- *Muscular dystrophy*
- *Spinal cord damage*
- *Arthritis*
- *Loss or deformity of limbs*

David

Sitting in the corner of the playground, David twirls a twig he broke off a tree. He enjoys playing by himself and may do so all day, unless another child or teacher encourages him to join the group.

Inside, he roams around the room distracted by the many activities. If forced to participate, David may throw a tantrum. At times, he sits in the manipulative activity area pounding the peg board.

The Fox and The Hound is David's favorite book. He also likes to play the guitar and dress up in a cowboy hat and boots. With encouragement and prompting, he uses words, but they are not clear.

David attends a public elementary school where he is enrolled in a segregated early childhood special education class. In the afternoon he rides a bus to The Open Door, an inclusive child care center for children with and without disabilities. His teacher, Candy, develops structured activities for him. He performs best when activities are child rather than teacher-directed and his schedule is consistent.

David lives with his mother, who is single and works full-time. She always finds the time to provide him with the love and attention he needs. David enjoys visiting his grandmother's house to play with his cousins. His mother and grandmother play a major role in his development.

David is a five-year old with autism.

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Accommodations for David

The Open Door is an NAEYC accredited nonprofit child care center. Of the 34 children they serve, as many as 30 percent have some sort of disability, including cerebral palsy, Down syndrome, developmental delay, hyperactivity and autism.

To include David, The Open Door has made these accommodations: ☞

Challenging Behaviors

Children not only speak to us with their words, but also with their behavior. *All children behave in unacceptable ways at times.* They may scream, throw tantrums, cry, bite, or kick other children. Their behavior is a way of telling others their desires and frustrations. Every action has a purpose; a child may misbehave to show disappointment, get attention, gain power or protest unfair treatment.

Common challenging behaviors include:

- *Attention Deficit and Hyperactivity Disorder (ADHD)*
- *Autism*
- *Emotional disturbance*
- *Hyperactivity*

INCLUSION PLAN

Physical:

- *Dramatic play occurs outdoors, as well as indoors.*
- *David can listen to tapes or calm down after a tantrum in a designated quiet space.*

Programmatic:

- *The staff use pictures to show David his daily schedule.*
- *Interns, volunteers, student teachers and aides are used to reduce the child/staff ratio.*
- *Materials are stored away from view and reach.*
- *David can choose to pursue quiet alternative activities instead of those the other children are doing.*
- *The number of child-directed activities has been increased.*
- *A dress-up box provides a variety of clothing.*
- *After having a tantrum, the teacher gets David to join in an activity.*
- *The discipline program provides consistency with the discipline David experiences at home.*
- *A talkative buddy pairs with David.*
- *David's favorite books and tapes are easy for him to use.*
- *The staff always offer David choices, even if he doesn't respond.*
- *The staff provides David with plenty of physical contact.*

Andrea

Andrea smiles constantly and seeks interaction with children and adults. She enjoys playing dress up and pretending to be Cinderella. During circle time, Andrea sometimes becomes frustrated because she cannot understand the story. She touches the pictures, but loses interest and usually walks away.

Although Andrea wears a hearing aid, that doesn't always improve her ability to hear—since she likes to give away her hearing aid batteries to her best friends or bury them in the sandbox! She can verbalize a few words, although they may be unclear. She communicates best with facial expressions and gestures. Her teachers are trained in sign language. Andrea's peers are also learning sign so they can communicate with her.

Andrea, a gregarious child of five, has a hearing impairment.

Accommodations for Andrea

After half a day at Forest North Elementary School, Andrea takes a bus to Anderson Mill Baptist Child Care Center, located in a cozy neighborhood. Because Anderson Mill is controlled by a religious organization, it is exempt from compliance with Title III of the ADA. However, they have opened their center to children with disabilities. Currently, six percent of the 245 children enrolled have disabilities. The center has not made major changes to accommodate children with cerebral palsy, seizure disorders or hearing impairments in their center. Two members of the staff have willingly learned sign language to increase their abil-

ity to care for children with hearing impairments.

To include Andrea, Anderson Mill Baptist Child Care Center has made these accommodations:

INCLUSION PLAN

Physical:
- *Flashing lights and loud sounds announce events.*
- *Andrea can easily see the teacher by her positioning in the room.*
- *Everything is easy to see by using high-watt lighting .*

Programmatic:
- *Teachers ensure Andrea's batteries are working in her hearing aid.*
- *Communication relies on pictures.*
- *Other children pair with Andrea to help her understand instructions.*
- *More group activities give Andrea additional opportunities to practice talking.*
- *The teacher uses gestures and sign language when reading aloud.*
- *Andrea reads books with pictures and tapes. She enjoys music, although she cannot understand the words.*
- *The communication specialist employed by the school district comes to the center once a week to teach the teachers and children American Sign Language.*

Communication Disabilities

Language is the tool by which we learn new ideas, store information and share thoughts with others. Most children develop language and speech skills without any trouble. However, some children need help developing their language skills.

Many different types of communication disabilities or reasons exist for a child to be unable to understand or use words properly. Some children cannot hear what is said; others are able to hear but do not understand what is said. Other children have difficulty using words.

Children with communication disabilities experience difficulty or delay with one or more of the following:
- *The ability to receive speech in a typical or normal manner, due to a physical problem such as hearing loss*
- *The ability to process or understand word meanings*
- *The ability to speak or express themselves*
- *The ability to form sounds and pronounce words clearly*
- *The ability to vocalize easily, loudly or at all*

Some children with hearing impairments may need to use alternative methods of communication, such as:
- *Natural gestures—body orientation, pointing, touching, gazing*
- *Photograph boards*
- *Communication boards*
- *Computers*
- *Electronic devices*
- *Written words*

Christine

Christine loves her foster parents and the four other children who live with them. The family plans outdoor gatherings where Christine and the other children enjoy running and playing. Usually Christine has to play indoors because of her tendency to contract ear and respiratory infections. She takes many medications to help with these illnesses and makes frequent trips to the bathroom because of ongoing diarrhea.

Like all normal four-year-olds, she enjoys playing house with other children and usually wants to be the mom. She likes dressing dolls but becomes agitated because she has trouble with buttons and zippers. Christine loves snacks. She enjoys *Popsicles* the best. Christine is a very bright four-year old who is infected with the HIV virus.

Accommodations for Christine

Christine's foster parents have made a commitment to care for children with HIV. All of their foster children have the virus. However, Christine is the only one who is not an infant. Because they wanted her to enjoy a typical environment and play with children her own age, Christine's foster parents have made arrangements for her to attend a family child care home down the street.

The family child care home has helped Christine take active part in activities by doing the following:

INCLUSION PLAN

Physical: *None needed.*

Programmatic:

- *Velcro fasteners for doll clothes instead of zippers and buttons.*
- *The staff use gloves for diapering all children.*
- *Training helps staff control biting and scratching.*
- *Staff follow universal health precautions.*
- *The director emphasizes the importance of confidentiality.*
- *The director provides the staff and families with HIV education.*
- *The center gets permission from the parents to confer with Christine's medical personnel as needed.*
- *The staff provide indoor gross motor activities and supervision when Christine is unable to go outside.*
- *When needed, a special diet controls diarrhea.*
- *The staff treat all children the same (i.e. as if they were infected with HIV).*

AIDS (Acquired Immune Deficiency Syndrome)

AIDS is a disease caused by a virus known as human immunodeficiency virus (HIV). The virus attacks the body's immune system and leaves an individual susceptible to infections.

HIV is transmittable through the exchange of blood and semen. It is transmitted through sexual contact, contaminated blood or nonsterile hypodermic needles.

Some children are born with the HIV virus or can acquire the virus through the mother's breast milk.

FINDING RESOURCES

Including children with disabilities in your child care center will be accomplished with some assistance from many community resources. Listed below are some of the resources to help you open the door for children with disabilities.

Assistance Programs

Aid to Families With Dependent Children (AFDC)
A financial and medical assistance program which provides help to families until they are able to achieve economic self-sufficiency. The amount of cash assistance varies depending upon family size, household income and other factors.

Child Care and Development Block Grant Program
A source of funds for states to improve the quality, affordability and availability of child care. Funds are designated for children younger than 13 years of age (and up to age 19 if the child has special needs) whose families earn up to 75 percent of the state's median income. In some states, a portion of the money has been designated for children with disabilities, developmental delays and other special needs.

Children's Defense Fund (CDF)
A private, nonprofit organization which advocates for the needs of poor, minority, and disabled children. CDF educates citizens about children's needs and policy options for meeting those needs. CDF disseminates information on issues affecting children, monitors the development and implementation of federal and state polices, and provides support to a network of state and local child advocates and service providers.

Child Health Services Block Grant Program
A grant program in which each state receives funds to provide services for children with special health care needs and for basic health services for children and pregnant women . Many programs operate clinics and provide

specialized medical services such as physical therapy, occupational therapy, speech, language and hearing services, and adaptive equipment. Contact your state program for Children with Special Health Care Needs for more information.

Civilian Health and Medical Program of the Uniformed Services (CHAMPUS)
A program providing medical services for families of military personnel who cannot be served in military hospitals. Eligible parents may contact their base commander or Project CARE office for information.

Developmental Disabilities Programs
A program distributing federal money to states to provide services and advocacy assistance to persons with developmental disabilities up to 21 years of age. Contact your state's Developmental Disabilities Planning Council for more information.

Early Periodic Screening, Diagnosis, and Treatment (EPSDT)
A special program under Medicaid which funds health and medical examinations and various medical and therapeutic services for income eligible children up to 22 years of age. Call your local Medicaid agency for more information.

Head Start
A federally funded program which provides services to low income families with children up to four years of age. The program provides an educational program to meet a child's individual needs, early identification of health problems, strong parent involvement, and other needed services. Ten percent of Head Start enrollment is available for children with disabilities. Grants are awarded by the Department of Health and Human Services Regional Offices and the ACYF Native American and Migrant Program Branches to local public agencies, private non-profit organizations and school systems for the purpose of operating Head Start programs at the community level.

Medicaid
A federal program which pays for medical services for persons who cannot afford such care. Each state has an agency that administers the Medicaid program under a state plan. Persons qualified for Aid to Families with Dependent Children (AFDC) or Supplemental Security Income (SSI) are automatically eligible for Medicaid in most states.

Medically Dependent Children Waiver Program (MDCP)
A waiver for medically fragile children available in many states which provides nursing and medical services. Check with your Medicaid office or agency for more information.

National Information Center for Children and Youth with Disabilities (NICHCY)
An organization that provides free information to assist parents, educators, caregivers, advocates, and others in helping children and youth with disabilities to become participating members of the community. NICHCY operates as a national clearinghouse through the Clearinghouse for the Handicapped Program authorized by Section 633 of Part D of the Education of the Handicapped Act (20 U.S.C.) as amended by Public Law 99-457. Call 1-800-999-5599 for more information.

Individuals with Disabilities Education Act (IDEA) (originally enacted in 1975 and named The Education for All Handicapped Children Act) is a federal law which guarantees all children with disabilities a free and appropriate public education.

Part B Provides that all students with a disability aged 3 to 22 receive an appropriate education in the least restrictive environment, guarantees due process safeguards and provides grants to states to assist them in providing special education and related services.

Part H Provides assistance to states to develop and implement interagency programs of early intervention

services for children with disabilities from birth to their third birthday, developmental delays, or those at-risk of substantial delay.

State Family Support Subsidy Programs
Family support programs, available in some states, provide families with a cash payment or other services. Contact the Developmental Disabilities Planning Council in your state to see if such a program exists.

Supplemental Security Income (SSI)
Program provides basic income for poor children who are 18 years or under of age and blind or have a severe disability or a chronic illness. The family receives a monthly check to spend on the child's behalf. The exact amount of the check depends upon the family's income level. To be eligible, a family's income can not exceed $20,000 with assets up to $5,000. For more information call the Social Security Administration Office, 1-800-234-SSSA

United Way
More that 2,300 local United Way organizations meet local health and human-care needs, including child care. Each United Way is an independent community resource governed by a local board of volunteers who raise funds through a single annual community-wide campaign. Groups which receive United Way funds must be nonprofit, tax- exempt charities and governed by volunteers. Each United Way agency must also submit an annual independent financial audit, provide services at a reasonable cost, and maintain a policy of nondiscrimination.

Women, Infants, and Children (WIC)
A program which provides supplemental food for women who are pregnant or breast-feeding, and children to age five. Call your local health department for information.

Books and Curricula

Children with Special Needs in Early Childhood Settings
Authors: Carol L. Paasche, Lola Gorrill, and Bev Strom
Publisher: Addison-Wesley Publishing Company, Menlo Park, California (1990)
Description: A resource guide to help early childhood personnel identify children with special needs and integrate them into natural settings. The book provides information about various disabilities and recommends ways to meet special needs within natural settings.
Cost: $18.95

Circle of Friends
Author: Robert Perske
Publisher: Abingdon Press, 201 Eighth Avenue South, Nashville, TN 37202 (1988)
Description: A collection of true stories about friendships between people with and without disabilities. The book shows how these circles of friendships cut across age groups, generations, and races, and how everyone can be enriched.
Cost: $10.00

Project Kidlink: Bringing Together Disabled and Nondisabled Preschoolers
Author: Developed by the Early Education Team, The Capper Foundation, Topeka Kansas
Publisher: Communication Skill Builders, Tucson, Arizona 85733 (1991), 602-323-7500
Description: A first-hand account of how one school for children with physical disabilities integrated the preschool and therapy programs.

Day Care Serving Children with Special Needs
Author/Publisher: U.S. Department of Health and Human Services. Office of Human Development Services, Administration for Child Youth and Families; for sale by the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402
Description: An easy to read guide describing how to care for children with disabilities.

Special Needs in Ordinary Schools, Preschool Provision for Children with Special Needs
Author: Brenda Robson
Publisher: Cassess Education Limited (1989)
Description: A review of policy for preschool education and a description of changes necessary for the successful integration of children with special needs.

Developmentally Appropriate Practice in Early Childhood Programs Serving Children From Birth through Age 8
Editor: Sue Bredekamp
Publisher: National Association for the Education of Young Children, 1834 Connecticut Avenue, N.W., Washington, D.C. 20009-5786 (1987)
Description: Appropriate and inappropriate teaching practices for children ranging from infancy through 8 years of age.
Cost: $5.00

Handbook for the Care of Infants and Toddlers with Disabilities and Chronic Conditions
Author: First Start Program, University of Colorado Health Sciences Center, School of Nursing
Publisher: Learner Managed Designs, Inc., Lawrence, KS 66047 (1991)
Description: Easy-to-use source of information on the special needs of infants and toddlers with disabilities.

Mainstreaming Young Children: Myths and Realities
Publisher: Indiana Association for the Education of Young Children
Description: Points out the benefits of integration for children with and without disabilities. Suggests activities to help other children be accepting and understanding people with disabilities.

Reaching, Crawling, Walking . . . Lets Get Moving—Orientation and Mobility for Preschool Children
Author: Susan S. Simmons, Ph.D. and Sharon O'Mara Maida, M.Ed.
Publisher: Blind Children's Center, 4120 Marathon St., Los Angeles, California 90029 (1991)
Description: Written for parents of young children with visual impairments. Describes how children-infants through preschoolers-begin to understand space and learn how to move through it.

The Special Child
Authors: S.M. Pueschel, J.C. Bernier, and L.E. Weidenman
Publisher: Paul H. Brookes, P.O. Box 10624, Baltimore, MD 21285-0624
Description: Focuses on the young child; an excellent resource for both parents and professionals, 368 pages.

Together Successfully
Authors: John E. Rynders, Ph.D., and Stuart J. Schleien, Ph.D.
Publisher: The Arc, National Headquarters (1991)
Description: This handbook is filled with practical, detailed, step-by-step directions for integrating children into recreation programs. Much of the content is relevant to preschool settings.
Cost: $12.50

Including All of Us—An Early Childhood Curriculum About Disability
Author: Merele Froschl, Linda Colon, Ellen Rubin, Barbara Sprung; Developed by Project Inclusive Educational Equity Concepts, Inc., Women's Education Equity Act Program, U.S. Department of Education.
Publisher: Educational Equity Concepts, Inc., New York, New York (1984). Distributed by Gryphon House, Inc., 3706 Otis Street, P.O. Box 275, Mt. Rainier, MD 20712
Description: A guide to help providers develop an inclusive classroom, one that is nonsexist, multicultural and accessible to children with disabilities.
Cost: $10.95

First Start—Care of Handicapped Infants and Toddlers
Author: University of Colorado Health Sciences Center, School of Nursing
Publisher: First Start Program, 4200 East 9th Avenue, Box C- 287, Denver, Colorado, 80262 (1991)
Description: Training curriculum for providers who care for children with disabilities.

A Training Manual for Child Care in the Neighborhood
Authors: PACE Program of Oregon
Publishers: PACE, University of Oregon, 901 E. 18th Avenue, Eugene, OR 97403
Description: Guide to provide child care for young children with disabilities in typical settings.

Infant Stimulation Curriculum
Author: Emily Vargas Adams, Ph.D.
Publisher: CEDEN Family Resource Center, 1208 East 7th Street, Austin, TX 78702, 512-477-1130
Description: A guide which provides specific stimulation activities for parents, child care providers and others to help children with disabilities develop language, gross motor, fine motor and social affective skills.

It Takes Two to Talk, A Hanen Early Language Parent Guide Book
Author: Ayala Manolson
Publisher: Hanen Early Language Resource Centre, 252 Bloor St. W., Room 4-126, Toronto, Ontario, M5S 1V6
Description: A curriculum to help families and teachers assist language delayed children with daily activities.

Anti-Bias Curriculum: Tools for Empowering Young Children
Author: Louise Derman-Sparks and the A.B.C. Task Force
Publisher: National Association for the Education of Young Children, Washington, D.C. (1989)
Description: A book with suggestions on helping children and staff respect each other as individuals.
Cost: $7.00

Mainstreaming Ideas for Teaching Young Children
Author: J. Souweine, S. Cummins, and C. Nazel
Publisher: National Association for the Education of Young Children
Description: A book with program ideas for including children with special needs in an early childhood program.
Cost: $5.00

Integrated Child Care: Meeting the Challenge
Authors: Sarah A. Mulligan, M.Ed., Kathleen Miller Green, M.A., Sandra L. Morris, B.A., Ted J. Maloney, M.A., Dana McMurray, M.A., Tamara Kittelson-Aldred, M.S., ORT/L.
Publisher: Communication Skill Builders, 3830 E. Bellevue, P.O. Box 42050, Tucson, AZ 85733, 602-323-7500, 1992.
Description: An excellent, easy to read book covering all aspects of caring for children with disabilities in inclusive settings.

MITCH - (Model of Interdisciplinary Training for Children with Handicaps)
Author/Publisher: Florida Department of Education, Division of Public Schools
Description: An excellent series of easy to read manuals covering all aspects of caring for children with disabilities in inclusive settings.
Cost: Varies

- *Intellectual Development* - (Cost: $6.00)
- *Speech and Language Development* - (Cost: $6.60)
- *The Child Who Seems Different* - (Cost: $7.40)
- *Family Functioning* - (Cost: $5.20)
- *Listening and Sensory Integration* - (Cost: $5.20)
- *Behavior Management* - (Cost: $5.80)
- *The Caregiving Environment* - (Cost: $6.30)
- *Health Care* - (Cost: $5.20)
- *Motor Development* - (Cost: $6.00)
- *Nutrition and Feeding Practices* - (Cost: $7.00)
- *Working Together: Communication Skills for Parents, Caregivers, and Other Professionals* - (Cost: $5.00)

Children's Books

On Our Own Terms—Children Living with Physical Disabilities
Author: Thomas Bergman
Publisher: Gareth Stevens Children's Books, 1555 North River Center Drive, Suite 201, Milwaukee, Wisconsin 53212
Description: Young readers meet children like themselves, except that these children have disabilities. The book shows the reader that their illness or disability should not cause separation, embarrassment, or fear.

Our Brother Has Down Syndrome
Author: Shelley Cairo
Publisher: Annick Press Ltd., Toronto Canada N2N553 (1985)
Description: An introduction to Down syndrome for children.
Cost: $4.95

Princess Pooh
Author: Kathleen M. Mulddon
Publisher: Albert Whitman & Company, 6340 Oakton Street, Morton Grove, Illinois 60053-2723, 1-800-255-7675.
Description: Younger sister learns to cope with her feelings and grow in understanding her 10-year-old sister who uses a wheelchair. For grades 2-5.
Cost: $12.95

Rachel
Author: Elizabeth Fanshawe
Publisher: The Bodley Head Ltd., 9 Bow Street, London WC2E 7AL (1975)
Description: Written for children to help them understand the feelings and some of the problems faced by children with disabilities. The book talks about Rachel's experience of being in a wheelchair.
Cost: $1.50

A Cane in Her Hand
Author: Ada B. Litchfield
Publisher: Albert Whitman & Company, 6340 Oakton Street, Morton Grove, Illinois 60053-2723, 1-800-255-7675.
Description: A story of a visually impaired child and how she copes with her problems. Grades 1-3.
Cost: $13.95

Howie Helps Himself
Author: Joan Fassler
Publisher: Albert Whitman & Company, 6340 Oakton Street, Morton Grove, Illinois 60053-2723, 1-800-255-7675.
Description: A child with cerebral palsy achieves a victory. Presents a positive, unfrightening picture to children. Grades 1-3.
Cost: $13.95

A Button In Her Ear
Author: Ada B. Litchfield
Publisher: Albert Whitman & Company, 6340 Oakton Street, Morton Grove, Illinois 60053-2723, 1-800-255-7675.
Description: Interracial book for children. Anti-racist and anti-sexist with humor. Grades 1-3.
Cost: $13.95

Words in Our Hands
Author: Ada B. Litchfield
Publisher: Albert Whitman & Company, 6340 Oakton Street, Morton Grove, Illinois 60053-2723, 1-800-255-7675.
Description: A book about family life with deaf parents. The author inserts facts about deafness and the language of signing. Grades 2-4.
Cost: $13.95

I'm Deaf and It's Okay
Author: Lorraine Aseltine et al.
Publisher: Albert Whitman & Company, 6340 Oakton Street, Morton Grove, Illinois 60053-2723, 1-800-255-7675.
Description: A book talking about a boy's experiences of being deaf. Grades 1-4.
Cost: $11.95

Grandma Drives a Motor Bed
Author: Diane Johnston Hamm
Publisher: Albert Whitman & Company, 6340 Oakton Street, Morton Grove, Illinois 60053-2723, 1-800-255-7675.
Description: Josh's greatest thrill is trying out the motor bed. He realizes the value of the elderly and the special force of grandparents in his life. Preschool.
Cost: $11.95

Grandma's Wheelchair
Author: Lorraine Henriod
Publisher: Albert Whitman & Company, 6340 Oakton Street, Morton Grove, Illinois 60053-2723, 1-800-255-7675.
Description: Written for children to help them understand the feelings and some of the problems faced by children with disabilities. Preschool.
Cost: $13.95

He's My Brother
Author: Joe Lasker
Publisher: Albert Whitman & Company, 6340 Oakton Street, Morton Grove, Illinois 60053-2723,1-800-255-7675.
Description: A brother shares his affection for his brother with a learning disability. Grades 1-3.
Cost: $13.95

Nick Joins In
Author: Joe Lasker
Publisher: Albert Whitman & Company, 6340 Oakton Street, Morton Grove, Illinois 60053-2723, 1-800-255-7675.
Description: A young boy using a wheelchair expresses his fear of going to school. Grades 1-3.
Cost: $13.95

Our Teacher's In a Wheelchair
Author: Mary Ellen Powers
Publisher: Albert Whitman & Company, 6340 Oakton Street, Morton Grove, Illinois 60053-2723, 1-800-255-7675.
Description: The book provides a message that a disability doesn't mean inability. Grades Preschool to 3.
Cost: $11.95

Making Room for Uncle Joe
Author: Ada B. Litchfield
Publisher: Albert Whitman & Company, 6340 Oakton Street, Morton Grove, Illinois 60053-2723, 1-800-255-7675.
Description: The book talks about three children's lives when a relative with mental retardation comes to live with them. Grades 2-5.
Cost: $11.95

Where's Chimpy?
Author: Berniece Rabe
Publisher: Albert Whitman & Company, 6340 Oakton Street, Morton Grove, Illinois 60053-2723, 1-800-255-7675.
Description: A little girl with Down syndrome needs her toy monkey before she goes to school. Grades Preschool to 2.
Cost: $13.95

On Being Sarah
Author: Elizabeth Helfman
Publisher: Albert Whitman & Company, 6340 Oakton Street, Morton Grove, Illinois 60053-2723, 1-800-255-7675, October 1992.
Description: A twelve-year old with cerebral palsy's viewpoint of her worldly experiences. Grades 5-9.
Cost: $11.95

Special Parents, Special Children
Authors: Joanne Bernstein & Bryna Fireside
Publisher: Albert Whitman & Company, 6340 Oakton Street, Morton Grove, Illinois 60053-2723, 1-800-255-7675.
Description: A book which provides testimony of parents with disabilities.
Cost: $11.95

Signs For Me
Author: Ben Bahan & Joe Dannis
Publisher: Dawn Sign Press, 9080 Activity Road, Suite A, San Diego, California 9216, 619-549-5330, 1990.
Description: A book of basic sign vocabulary for children, parents and teachers.
Cost: $12.95

We are All Alike...We Are All Different
Author: The Cheltenham Elementary School Kindergartners
Publisher: Scholastic Inc., 730 Broadway, New York NY 10003, 1-800-631-1586, 1991.
Description: A book written by a kindergarten class talking about differences.
Cost: $7.00

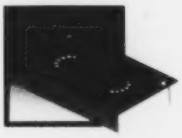
We Can Do It!
Author: Laura Dwight
Publisher: Checkerboard Press, Inc., 30 Vesey Street, New York, New York 10007, 1992.
Description: A book discussing children with disabilities.
Cost: $7.95

The Balancing Girl
Author: Berniece Rabe
Publisher: E.P. Dutton, a division of Penguin Books USA Inc., 1981.
Description: Despite her disability, Margaret's special skills help her earn money for the school and the respect of her classmates.
Cost: $4.95

Journals Magazines Newsletters

Exceptional Parent, Parenting Your Child With A Disability
Editor in Chief: Maxwell J. Schleifer, Ph.D.
Address: Post Office Box 3000 Dept EP, Denville, NJ 07834, 1-800-247-8080
Subscription: $18 a year
Published: 8 times a year
Description: A magazine which provides practical as well as technical information (without the professional jargon) on parenting and caring for children with disabilities.

Young Children—The Journal of the National Association for the Education of Young Children
Address: NAEYC, 1834 Connecticut Ave., Washington, D.C. 20009-5786
1-800-424-2460
Published: 6 times a year
Description: A magazine which keeps members abreast of the latest developments in early childhood education with its easy to read yet scholarly approach to practice, research and theory.
Cost: $25 a year for non-members, single copies $4 each



Videos

Child Care and the ADA - Series of 8 tapes - (7-10 minutes in length)

- *Daycare and the Americans with Disabilities Act: An Overview*
- *Ensuring Access*
- *Working with Parents and Community Resources*
- *Situations and Solutions; Needs and Abilities of the Child with a Disabling Condition*
- *Recognizing Developmental Delay*
- *Behavioral and Developmental Issues*
- *Issues for Family Daycare Centers*
- *The Bottom Line*

Producer/Distributer: Eastern Washington University's Center for Health Research and Beth Ann Carr Associates, 509-458-6326
Description: Materials suggest ways of accommodating children with disabilities which can be accomplished in many child care settings.

Just a Kid Like Me

Producer/Distributer: Child and Family Services, 626 N. Coronado Terrace, Los Angeles, CA 90026
Description: Demonstrates three different child care environments in which children with disabilities are integrated.

Having a Developmentally Disabled Child

Producer/Distributer: Young Adult Institute, 460 West 34th Street, New York, NY 10001-2382, 212-563-7474
Description: Tells about how parents of young children with disabilities feel and what they go through.

Cooperating Together-(22 minutes)

Robert F. Busch, Ph.D., Ronald Gillam, Ph.D., Shirley Patterson, M.A.
Producer/Distributer: Learner Managed Designs, Inc., 2201 K West 25th Street, Lawrence, KS 66047, 913-843-9088
Copyright 1993, University of Kansas
Description: An overview of basic behavior management skills and enhancing social development of children.
Cost: $99.00

Playing Together - (24 minutes)

Robert F. Busch, Ph.D., Ronald Gillam, Ph.D., Shirley Patterson, M.A.
Producer/Distributer: Learner Managed Designs, Inc., 2201 K West 25th Street, Lawrence, KS 66047, 913-843-9088
Copyright 1993, University of Kansas
Description: An overview of the importance of play.
Cost: $99.00

The Process of Instruction (Approx. 20 min.)

Producer/Distributer: Learner Managed Designs, Inc., 2201 K West 25th Street, Lawrence, KS 66047, 913-842-9088
Copyright 1993, University of Kansas
Cost: $99.00

The Process of Communication (20 min.)

Producer/Distributer: Learner Managed Designs, Inc., 2201 K West 25th Street, Lawrence, KS 66047, 913-843-9088
Copyright 1993, University of Kansas
Description: Excellent overview of how teachers can help children develop communication skills.
Cost: $99.00

A Circle of Inclusion

Producer/Distributer: Learner Managed Designs, Inc., 2201 K West 25th Street, Lawrence, KS 66047, 913-843-9088
Copyright 1993, University of Kansas
Description: A beautiful and moving review of importance of inclusion in early childhood programs including interviews with parents of children with or without disabilities, children and teachers. All done in Raintree Montessori Preschool.
Cost: $99.00

Taking Off Lids
Producer/Distributer: Carleton Productions, 1500 Merivale Road Ottawa, Ontario, Canada KZE-6Z5, 613-224-1313
Description: Tells about Canadian preschools including children with disabilities.

Two Stories of Hope
Producer/Distributer: The ARC Morris County Chapter, N.J.
Description: Relates to children who have Down syndrome and their integrated community life.

Regular Lives
Producer/Distributer: TASH
Description: Depicts children and adults participating in integrated environments. Parents, students and consumers speak. The focus is on students with disabilities in typical school, recreational and work environments and on the impact of integration on their lives and the lives of people around them.

Integrating Deaf Children
Producer/Distributer: Gallaudet University Child Development Center, 800 Florida Avenue, N.E., Washington, DC 20002
Description: Three-part videotape and accompanying manual to assist child care providers in integrating children who are deaf.

Stepping Stones
Producer/Distributer: Ray McKelvy, Agency for Instructional Technology (AIT), Box A, Bloomington, IN 47402-9990, 1-800-457-4509, 812-339-2203
Description: A comprehensive video series with thirty 15- minute programs for training parents, families, or child care providers with all children from birth to 36 months including those with special needs.
Cost: Set of 30 programs - $2,495, per program - $100

- *Program 1 - Introduction*
- *Program 2 - Looking and Fixating*
- *Program 3 - Stretching and Moving Body Parts*
- *Program 4 - Tracking*
- *Program 5 - Head and Trunk Control*
- *Program 6 - Babbling and Vocalizing*
- *Program 7 - Rolling Over and Pushing Up*
- *Program 8 - Attending and Inspecting*
- *Program 9 - Reaching and Grasping*
- *Program 10 - Eating and Drinking*
- *Program 11 - Sitting*
- *Program 12 - Imitate Sounds and Actions*
- *Program 13 - Midline and Transfer*
- *Program 14 - Object Permanence*
- *Program 15 - Crawling and Creeping*
- *Program 16 - Stacking, Building, and Knocking Over*
- *Program 17 - Standing Up*
- *Program 18 - Shapes and Formboards*
- *Program 19 - Cruising and Toddling*
- *Program 20 - Playing and Socializing with Adults*
- *Program 21 - Placing and Removing Objects*
- *Program 22 - Making Toys Work*
- *Program 23 - Scribbling*
- *Program 24 - Looking at and Interacting with Books*
- *Program 25 - Climbing and Running*
- *Program 26 - Naming Objects and People*
- *Program 27 - Jumping*
- *Program 28 - Using Objects As Means-Ends*
- *Program 29 - Throwing and Catching*
- *Program 30 - Conclusion*

Nationwide Integrated Child Care Centers

The following child care centers responded to a nationwide survey to identify early childhood programs serving children with disabilities in integrated settings. These centers or family day homes have not been evaluated but could be a valuable resource to families or other centers interested in including children with disabilities.

Alabama

ARC Day Care
Bobby Brown
1700 Hwy 78 E.
Jasper, AL 35501
205-221-9100

Headstart
Ethel Almon
1000 West 12th St.
Anniston, AL 36201
205-237-8628

Jasper Play School
Mrs. Hanvey
209 Highway 195 N.
Jasper, AL 35501
205-221-5273

Walker College Child Development Center
Donna Summer
1400 Gamble Avenue
Jasper, AL 35501
205-387-0511

Arkansas

Project K.I.D.S.
Francis Allen
Taylor at Lee
Little Rock, AR 72205

Arizona

We Care
Bill Raach
3530 North Oracle
Tucson, AZ 85795
602-293-0070

California

1st Step Day Care (ARC-Alameda Co.)
Donna T. Wolfe
Barbara Garcia
4655 Steele St.
Oakland, CA 94619
510-482-5801

Allan Hancock College Child Day Care Center
Kathy Sherwood
800 S. College
Santa Maria, CA 93454
805-922-6966

Bethel After School Enrichment Program (BASE)
624 E. Camino Collegio
Santa Maria, CA 93454
805-922-6601

Bush Creek Nursery School
4657 Badger Rd.
Santa Rosa, CA 95409
707-539-1612

Child Development Services
Julia Lynch
San Bernardino, CA 92410
619-245-0770

Children's Resource And Referral Program
1862 S. Broadway, Suite 109
Santa Maria, CA 93454
805-925-1989

Coordinated Child Care
Ms. Walenska
P.O. Box 868
Riverside, CA 92502
714-788-6626

Learning to Learn
Kathy Kade
391 Maria Drive
Petaluma, CA 94952
707-762-8570

Mt. Taylor Children's Center
Terry Ziegler
1451 Slater St.
Santa Rosa, CA 95404
707-576-0773

Pomona Child Care
Alma Visser
153 E. Pasadena St.
Pomona, CA 91767
714-629-5011

Colorado

3rd Ave. Day Care Center
300 Garfield St.
Denver, CO 80206
303-322-6659

Aurora Learning Center
Gail Hipke
13645 E. Bayard Ave.
Aurora, CO 80012
303-344-8376

Children's Enrichment Center
Pam Eden
15250 E. 6th Ave.
Aurora, CO 80011
303-341-9067

Growing World Child Care Center
Patty Shelby
3240 Tucson St.
Aurora, CO 80011
303-364-8143

Havana Street Learning Center
Judy Grzesek
946 Havana St.
Aurora, CO 80010
303-366-1174

Noah's Arc Child Care Preschool
Barbara Chambers
1880 Eagle
Aurora, CO 80011
303-363-8747

Sewell Child Development Center
Heidi Heisenbuttel
1360 Vine St.
Denver, CO 80206
303-399-1800

Shirley Bolden Family Day Care
Shirley Bolden
2250 Oakland St.
Aurora, CO 80010
303-341-9092

La Petite Academy
Marilyn Papke
15400 E 5th Place
Aurora, CO 80011
303-367-5304

Florida

East Coast Migrant Head Start
Anglea Arvilla
P.O. Box 1964
Wauchula, FL 33873
813-773-2815

Happy House Child Care
Marilyn Rossborough
P.O. Box 1282
Lake City, FL 32056
904-752-4736

Redlands Christian Migrant Association
Charlene Edwards
320 N. 9th Ave.
Wauchula, FL 33873
813-767-0222

Suwannee Valley Coordinated Child Care
Francesca Whitener
P.O. Box 2637
Lake City, FL 32056
904-755-5456

Illinois

DuPage Easter Seal
830 S. Addison
Villa Park, IL 60181
708-620-4433

Indiana

Churubusco Community Child Care Center
Claudia Melanson
111 Home Ave.
Churubusco, IN 46723
219-693-2966

Evansville ARC Preschool
Terri Knipp
615 West Virginia
P.O. Box 4089
Evansville, IN 47714
812-428-4505

Fayette Co. Schools Step Ahead Project
Donna McElfresh
306 W. 16th
Connersville, IN 47331
317-827-0191

First Class Child Care Center
Kathleen Linirll
609 E. Van Buren
Columbia City, IN 46725
219-244-3600

Grace Lutheran Nursery School
Linda Trowbridge
204 N.Main St.
Columbia City, IN 46725
219-244-7118

Head Start
Mary Lynn Frank
207 Ridgeview Place
Bluffton, IN 46714
219-824-5390

Kids World
Cathy Zimmerman
1236 Smith St.
Logansport, IN 46947
219-753-7956

Little Children's Ministries
Jane Horner
800 E. Broadway
Logansport, IN 46947
219-753-6058

Noble Centers, Inc.
Marissa Manlove
2400 North Tibbs Ave.
Indianapolis, IN 46222
317-264-1422

Wee Care Day Care Center
Pat Hooten
P.O. Box 109
Paoli, IN 47454
812-723-2273

YMCA Child Care Program
Melinda Shafer
905 E. Broadway
Logansport, IN 46947
219-753-5141

Iowa

Community Child Care Center
Colleen Bates
611 W.Jackson
Fairfield, IA 52556
515-472-9629

Kansas

Rainbows United
Lorraine Bockorny
2615 Wellesley
Wichita, KS 67220
316-684-7060

Institute of Logopedics
Sandy McAlister
2400 Jardine Drive
Wichita, KS 67219
316-262-8271

Wichita Council for the Preschool Blind
Angela Pratt
415 N. Poplar
Wichita, KS 67214
316-681-0522

Massachusetts

Head Start P.A.C.E. Inc.
Building T-8 Fort
Rodman
New Bedford, MA 02744
508-999-1286

KOALA (Kids of All Learning Abilities)
Allison Trawbridge
1249 Boylston St.
Boston, MA 02215
617-266-4520

Project Grow
Jane Taylor
Sippican School
Marion, MA 02738
508-748-0100

Project REL
Robin Friedlander
Cheska Komissov
300 Longwood Ave.
Gardner 6
Boston, MA 02115
617-735-6914

Village Kindergarten
Mrs. Hayes
Bush St.
S. Dartmouth, MA 02747

Maryland

DHR-Child Care Administration
Fran Sterner
10176 Baltimore
National Pike #115
Ellicott City, MD 21042
410-750-8770

Md. Committee For Children
Sandra Skolnik
608 Water St.
Baltimore, MD 21202
410-752-7588

Minnesota

A New Dimension Child Care Center
610 W. 28th St.
Minneapolis, MN 55408
612-870-4185

Burwell School For Child Dev. and Family Services
Eric Stevens
13120 McGinty Rd. East
Minnetonka, MN 55343
612-939-0396

Edina Kids Club
Linda Sisson
5701 Normandale Rd.
Edina, MN 55424
612-929-3431

North Carolina

Carolina Enrichment Center
100 Northgate Court
High Point, NC 27265
919-841-5000

Child World
2160 Chester Ridge Drive
High Point, NC 27262
919-889-2211

Clara Cox Day Care Center
606 E. Russell Ave.
High Point, NC 27260
919-887-3714

Creative Center for Children, Inc.
Mrs. Cleo Harris
608 James Road
High Point, NC 27265
919-869-5373

Daniel Brooks Day Care Center
1453 West Avenue
High Point, NC 27260
919-887-1412

Frank Porter Graham
Donna Bryant
CB8180 105 Smith Level Rd.
Chapel Hill, NC 27599-8180
919-966-4523

Greenwood Center
Bonnie Hillyer
P.O. Box 68
Albemarle, NC 28002
704-982-0515

Halifax County Mainstream Program
Jodie Britton, Angela Penick
P.O. Box 1199
Roanoke Rapids, NC 27870
919-537-7800

High Point Family Day Care Center
Tammy Davis
1616 English Road
High Point, NC 27262
919-885-9686

High Point YMCA
Chuck Penley
150 Hartley Ave.
High Point, NC 27265
919-869-0151

High Point YWCA
Amy Stroud
112 Gatewood Ave.
High Point, NC 27262
919-882-4126

Kidworks
Stephanie Fanjul
5311 Carl Sandburg Ct.
Raleigh, NC 27610
919-250-0543

Mitchell Grove United Methodist Church
4511 East Kivett Drive
High Point, NC 27260

Pitt County Early Intervention Program
Faye Bleicher
401 W. 1st Street, Suite 1C
Greenville, NC 27835
919-830-9548

Specialized Services, Inc.
Linda Lang
5009 D Western Blvd.
Raleigh, NC 27606
919-733-5993

Triad Child Developmental Center Inc.
Gloria Jackson
411 Old Winston Rd.
High Point, NC 27265
919-883-0409

North Dakota

Building Blocks Preschool
Linda Housh
419 2nd Ave. NW
Jamestown, ND 58401
701-252-2847

Headstart
Linda Rorman
P.O. Box 1074
Jamestown, ND 58401
701-251-1912

Kinderhaus/ARC
Betty Geigle
804 13th St. NE
P.O. Box 1646
Jamestown, ND 58401
701-252-4516

New Hampshire

Faith and Light
Ministry For The Deaf
Ministry for Persons With Disabilities
SPRED Program
Fr. Bernard Campbell
215 Myrtle St.
Manchester, NH 03108
603-669-3030

Merrimack Valley Day Care
Mary Jane Wallner
19 No. Fruit St.
Concord, NH 03301
603-224-1642

Rainbow Theater Project-Inc
Maureen Scipione
2321 Elm St.
Manchester, NH 03054
603-429-1772

The Whole Child Center
Cheryl Cook
P.O. Box 648, W. Main St.
Tilton, NH 03276
603-286-7077

New Jersey

ARC Day Care
Cecelia K. OBrien
P.O. Box 32
Washington, NJ 07882
908-689-1200

New Mexico

Leaping Lizards
Jill Sanger
215 Paseo Del Pueblo Norte
Taos, NM 87571
505-758-1311

Los Angelitos Preschool
Christine Gryniuk
P.O. Box 112
Taos, NM 87571
505-758-7178

Trudy's Discovery House
Gary Alias
230 Ranchitos Rd.
Taos, NM 87571
505-758-1659

Ohio

Ashtabula County Day Care
Tammy McTrusty
1501 East 31st St.
Ashtabula, OH 44004
216-992-6370

Clermont Co. Head Start
Alice Rensick
2291 Bauer Rd.
Batavia, OH 45103
513-732-7277

HHWP Head Start
Beth Brown
122 Jefferson
Lindlay, OH 45840
419-423-3755

Happy Days Child Care
Lin Nemet
136 East Erie St.
Jefferson, OH 44047
216-576-9645

New Beginnings Child Care
Kathy Tincher
2085 Front Wheel Drive
Batavia, OH 45103
513-724-3232

Thomas A. Wildey School
Dick Sternberg
St. Rt. 50 Box 8
Owensville, OH 45160
513-732-2651

USV Roundhead Head Start Center
Diane Nelson
ST. Rt. 117
Roundhead, OH 43346
513-464-2406

Williamsfield Preschool
Judy Chesko
P.O. Box 72
Williamsfield, OH 44093
216-293-8047

Oregon

Early Intervention Program
Clackamas County Education Services District
Barbara Bolstad
Janet Doughtery Smith
P.O. Box 216
Marylhurst, OR 97036
503-635-0503

Pennsylvania

Blue Mountain Child Development Center
Shelly Ayres
Route 309
New Tripoli, PA 18066
215-298-3373

Child Care Center, Inc.
Mary Engle
2960 E. Prospect Rd.
York, PA
717-840-4011

Christ Lutheran Church Day Care Center
Pat Seipel
126 W. Main St.
Dallastown, PA 17313
717-244-4832

L.V. YWCA
425 S. 15th St.
Allentown, PA 18103
215-432-6821

Lehigh Valley Child Care Inc.
1600 Hanover Ave.
Allentown, PA 18103
215-820-5333

Tennessee

ARC of Davidson Co. Summer Program
Richard Smith
2416 21st Ave. So.
Nashville, TN 37212
615-297-8525

Strawberry Hill Day Care
Janiece Smith
2707 Westwood Ave.
Nashville, TN 37212
615-298-5898

Susan Gray School
Bill Brown
P.O. Box 40
Vanderbilt Univ.
Nashville, TN 37203
615-322-8200

Texas

Anderson Mill Baptist Church Day Care Center
10633 Lake Creek Parkway
Austin, TX
512-258-5843

ARC/McLennan Co. After School Program
Camilla Bare
1825 Morrow Ave.
Waco, TX 76707
817-756-7491

Beary Best Academy
1460 East Glen
Mesquite, TX
214-216-1503

Child Care Inc.
Margaret Stewart
1000 Lamar #432
Wichita Falls, TX 76301
817-766-4332

Head Start
Wanda Smith
3505 Turtle Creek Blvd. Suite 201
Dallas, TX 75219
214-520-0081

Family Y
Jane Taylor
5001 Bartley Dr.
Wichita Falls, TX 76310
817-761-1000

Little Dudes Child Care Center
205 Sandra
Austin, TX
512-442-0405

The Open Door Preschool
2818 San Gabriel
Austin, TX
512-477-9632

Shunn's Place
Pat Wesley
2200 E. Ledbetter
Dallas, TX 75216
214-376-7050

YWCA Metropolitan
Sue Reed
4621 Ross Avenue
Dallas, TX 75204
214-827-5600

YMCA of San Antonio
The Children's Green House
10710 Nacogdoches
San Antonio, TX 78265
512-656-5777

Virginia

Before and After School Program
7987 Ashton Ave.
Manassas, VA 22110
703-792-7500

CASA Too!
Diane Rybarh
Linda Lifsey
18 N. King St.
Leesburg, VA 22075
703-777-0343

Child Caring Connection
Ann Horton
109 Cary St.
Williamsburg, VA 23185
804-229-7940

Child Development Resources
Corinne Garland
P.O. Box 299
Lightfoot, VA 23090
804-565-0303

Every Buddy Program
Beth Williams
7540 Hull St. Rd.
Richmond, VA 23235
804-276-9622

Fairfax County Child Care Center
Barbara Bennings
10201 Main St.
Fairfax, VA 22030
703-591-7140

Muriel Humphrey Center
Karen L. Smith
13505 Hillendale Drive
Woodbridge, VA 22193
703-670-4800

Paxton Child Development Center
Jo Waddell
Janice Romanish
320 N. King St.
Leesburg, VA 22075
703-777-3960

Resurrection Children's Center
Mary Ellen Hay
Kim Messinger
2280 N. Beauregard
Alexandria, VA 22304
703-820-6461

Special Recreation Programs of Loudoun Co.
Linda Lifsey
18 N. King St.
Leesburg, VA 22075
703-777-0438

Wyoming

Casper Day Care Center
Bev Creager
2020 E. 12th St.
Casper, WY 82601
307-235-5097

Girls' Club of Casper
Dawn Howerton
1860 E. 12th St.
Casper, WY 82601
307-577-0550

800 Numbers Related to Specific Disabilities or Conditions

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Allergy

American College of Allergy and Immunology
1-800-842-7777

Cancer

AMC Cancer Information Line
1-800-525-3777

American Cancer Society
1-800-227-2345

National Cancer Institute Information Service
1-800-422-6237

National Foundation for Cancer Research
1-800-321-2873

Cerebral Palsy

United Cerebral Palsy Associations (UCPA)
1-800-872-1UCP

UCPA Community Service Division
1-800-872-5UCP

Cleft Palate

American Cleft Palate Educational Foundation
1-800-242-CLEFT

Cooley's Anemia

Cooley's Anemia Foundation
1-800-221-3571
1-800-522-7222 (in New York)

Cornelia De Lange Syndrome

Cornelia De Lange Syndrome Foundation
1-800-223-8355

Craniofacial Disorders

International Craniofacial Disorders Foundation
1-800-535-3643

Cystic Fibrosis

National Cystic Fibrosis Foundation
1-800-FIGHT-CF

Cystic Fibrosis Research Hotline
1-800-824-5064

Deaf-Blindness

National Information Center on Deaf-Blindness
1-800-672-6720 ext. 5289
1-800-651-5289 (Voice/TDD in DC)

Diabetes

American Diabetes Association
1-800-232-3472

Juvenile Diabetes Foundation Hotline
1-800-223-1138

Down syndrome

National Down syndrome Congress
1-800-232-NDSC

National Down syndrome Society
1-800-221-4602

Dyslexia

Orton Dyslexia Society
1-800-222-3123

Epilepsy

Epilepsy Foundation of America
1-800-332-1000

Fragile X

National Fragile X Foundation
1-800-688-8765

Genetic Conditions

Alliance of Genetic Support Groups
1-800-336-GENE

Growth Disorders

Human Growth Foundation
1-800-451-6434

Head Injury

National Head Injury Foundation
1-800-444-NHIA
Families & Consumers only

Hearing Impairments

American Speech-Language-Hearing Association (ASHA)
Consumer Hearing and Speech Line
1-800-638-TALK (Voice/TDD)

Better Hearing Institute Helpline
1-800-EAR-WELL (Voice /TDD)

National Hearing Aid Society Helpline
1-800-521-5247

Occupational Hearing Services
Deal-A Hearing Screening Test
1-800-222-EARS
1-800-345-EARS (in PA)

Immunology and Respiratory

National Jewish Center for Immunology and Respiratory Medicine Lung Line
1-800-222-LUNG

Incontinence

Simons Foundation for Continence
1-800-23-SIMON

Kidney Disorders

American Kidney Foundation
1-800-638-8299

National Kidney Foundation
1-800-622-9010

Leprosy (Hansen Disease)

American Leprosy Missions
1-800-543-3131

Liver Disorders

American Liver Foundation
1-800-223-0179

Lupus

American Lupus Society
1-800-331-1802

Lupus Foundation of America
1-800-558-0121

Terri Gotthelf Lupus Research Institute
1-800-82-LUPUS

Mental Retardation

American Association on Mental Retardation
1-800-424-3688

The Arc
1-800-433-5255

Multiple Sclerosis

National Multiple Sclerosis Society
1-800-624-8236

Orthopedic Problems and Burns

International Shriners Headquarters
1-800-237-5055

Paralysis

American Paralysis Association
1-800-225-0292

Reyes Syndrome

National Reyes Syndrome Foundation
1-800-233-7393
1-800-231-7393 (in Ohio)

Sickle Cell Disease

National Association for Sickle Cell Disease
1-800-421-8453

Spina Bifida

Spina Bifida Hotline
1-800-621-3141

Spinal Cord Injury

National Spinal Cord Injury Association
1-800-962-9629

National Spinal Cord Injury Hotline
1-800-526-3456

Sturge-Weber Syndrome

Sturge-Weber Foundation
1-800-627-5482

Stuttering

National Center for Stuttering
1-800-221-2483

Stuttering Foundation of America
1-800-992-9392

Tourette Syndrome

Tourette Syndrome Association
1-800-237-0717

Tuberous Sclerosis

National Tuberous Sclerosis Association
1-800-CAL-NTSA

Vision Impairments

American Council for the Blind
1-800-424-8666

American Foundation for the Blind
1-800-AF-BLIND

Blind Children's Center
1-800-222-3566
1-800-222-3567 (in California)

National Association for Parents of the Visually Impaired
1-800-562-6265

National Eye Care Project Helpline
1-800-222-EYES

National Library Services for the Blind and Physically Handicapped
1-800-424-8567

National Society to Prevent Blindness
1-800-331-2020

National Information and Advocacy Groups

General Information

Association for the Care of Children's Health
7910 Woodmont Avenue
Suite 300
Bethesda, MD 20814
301-654-6549

Children's Defense Fund
122 C Street NW
Suite 400
Washington, DC 20001
202-628-8787

Christian Council on Persons with Disabilities
P.O. Box 458
Lake Geneva, WI 53147
414-275-6131

Congress of Organizations of the Physically Handicapped
16630 Beverly Ave.
Tinley Park, IL 60477-1904
708-532-3566

Council for Exceptional Children
1920 Association Drive
Reston, VA 22091
703-620-3660

Council on Family Health
225 Park Ave. South
17th Floor
New York, NY 10003
212-589-3617

Keshet-Jewish Parents of Children with Special Needs
3525 W. Peterson, T-17
Chicago, IL 60659
312-588-0551

Mothers United for Moral Support
150 Custer Court
Green Bay, WI 54301
414-336-5333

National Association for Minorities with Disabilities
3508 W. North Ave.
Milwaukee, WI 53208
414-442-0522

National Association of Protection and Advocacy Systems
900 Second St. NE, Suite 211
Washington, DC 20002
202-408-9514

National Catholic Office for Persons with Disabilities
P.O. Box 29113
Washington, DC 20017
202-259-2933 (Voice/TDD)

National Center for Youth with Disabilities
Adolescent Health Program
University of Minnesota
Box 721-UMHC
Harvard Street at East River Road
Minneapolis, MN 55455
1-800-333-6293
612-626-2825

National Easter Seal Society
70 E. Lake St.
Chicago, IL 60601
1-800-221-6827
312-726-6200
(4258-TDD)

National Information Center for Children and Youth with Disabilities (NICHCY)
P.O. Box 1492
Washington, DC 20013
1-800-999-5599
703-893-6061

National Organization on Disability
910 16th St. NW, Ste. 600
Washington, DC 20006
1-800-248-2253
202-293-5960
202-229-1187 (in Maryland)

National Parent Network on Disabilities
1600 Prince St., Ste. 115
Alexandria, VA 22314
703-684-6763

Career Counseling

ERIC Clearinghouse on Adult Career & Vocational Education
CETE
1900 Kenny Rd.
Columbus, OH 43210-1090
1-800-848-4815
614-292-4353

ERIC Clearinghouse on Handicapped and Gifted Children
1920 Association Drive
Reston, VA 22091-1589
703-264-9474
1-800-848-4815

Higher Education and Adult Training for People with Disabilities
(HEATH Resource Center)
1 Dupont Circle
Washington, DC 20036-1193
1-800-544-3284
202-939-9320

ABLEDATA
(funded by NIDRR)
1-800-227-0216

Job Accommodation Network (JAN)
West Virginia University
809 Allen Hall
P.O. Box 6123
Morgantown, WV 26506
1-800-526-7234
1-800-526-4698 (in WestVirginia)
1-800-526-2262 (in Canada)

National Federation for the Blind
Job Opportunities for the Blind (JOB)
1800 Johnson St.
Baltimore, MD 21230
1-800-638-7518
301-659-9314

Education

Association on Handicapped Student Service Programs in Post Secondary Education (AHSSPPE)
P.O. Box 21192
Columbus, OH 43221
614-488-4972 (Voice/TDD)

Hotlines and Clearinghouses

(Information related to)
Americans with Disabilities Act
1-800-872-2253

Disability and Business Technical Assistance Centers
(funded by NIDRR of the U.S. Dept. of Education)
1-800-949-4232

Clearinghouse on Disability Information
U.S. Dept. of Education
Switzer Building
330 C Street SW, Rm. 3132
Washington, DC 20202-2524
202-732-1723
202-732-1241

Direct Link
P.O. Box 1036
Solvang, CA 93464
805-688-1603

National AIDS Hotline
(Center for Disease Control, Public Health Service)
1-800-342-AIDS (English)
1-800-344-7432 (Spanish)
1-800-243-7889 (TDD)

National Digestive Diseases Information Clearinghouse
Box NDDIC
Bethesda, MD 20892
301-468-6344

National Information Center On Deafness
Gallaudet University
800 Florida Ave. NE
Washington, DC 20002
202-651-5051
202-651-5052 (TDD)

National Jewish Center for Immunology and Respitory Medicine
1400 Jackson St.
Denver, CO 80206-2762
1-800-222-5864 (Lung Line)
303-388-4461

National Spinal Cord Injury Hotline
Montebell Hospital
2201 Argonne Drive
Baltimore, MD 21218
1-800-526-3456

Social Security Administration Hotline
1-800-234-5772
1-800-325-0778 (TDD)

Legal

American Bar Association Center on Children and the Law
1800 M Street NW, Suite 300
Washington, DC 20036
202-331-2250

Disability Rights Education and Defense Fund (DREDF)
2212 Sixth St.
Berkeley, CA 94710
415-644-2555
1-800-466-4232

Mental Health Law Project
1101 15th St. NW, Suite 1212
Washington, DC 20036-5002
202-467-5730

National Center for Law and the Deaf
Gallaudet University
800 Florida Ave. NE
Washington, DC 20002
202-651-5373 (Voice/TDD)

National Disability Action Center
1101 15th St. NW
Washington, DC 20005
202-775-9231 (Voice/TDD)

Newborns With Illnesses

National Information Clearinghouse for Infants with Disabilities and Life-Threatening Conditions (Birth to 3 Years)
Center for Developmental Disabilities
University of South Carolina
Benson Bldg., 1st Fl.
Columbia, SC 29201
1-800-922-9234
1-800-922-1107 (in SC)

Parent Care
9041 Colgate St.
Indianapolis, IN 46268-1210
317-872-9913

Rare Disorders

Lethbridge Society for Rare Disorders
515 Seventh St. S
Lethbridge, AB
Canada T1J 2G8
403-329-0665

National Information Center for Orphan Drugs and Rare Diseases
P.O. Box 1133
Washington, DC 20013-1133
1-800-456-3505

National Organization for Rare Disorders (NORD)
100 Rt. 37, P.O. Box 8923
New Fairfield, CT 06812-1783
1-800-999-6673
203-746-6518

Rehabilitation

National Rehabilitation Information Center
8455 Colesville Rd., Suite 935
Silver Spring, MD 20910-3319
1-800-346-2742 (Voice/TDD)
301-588-9284

National Organizations for Specific Disabilities or Conditions

Acoustic Neuroma

Acoustic Neuroma Association
P.O. Box 398
Carlisle, PA 17013
717-249-4783

Aicardi Syndrome

Aicardi Syndrome Support Group
Denise M. Raynor
5115 Troy Urbana Rd.
Casstown, OH 45312
513-339-6033

Albinism/Hypopigmentation

National Organization for Alibinism and Hypopigmentation (NOAH)
1500 Locust St. 1816, Ste. 1816
Philadelphia, PA 19102
1-800-473-2310
215-545-2322

Allergies and Asthma

Asthma and Allergy Foundation of America
1717 Massachusetts Ave. NW
Ste. 305
Washington, DC 20036
202-265-0265
1-800-ASTHMA

Amputation

National Amputation Foundation
12145 150th St.
Whitestone, NY 11357
718-767-0596

Amyotrophic Lateral Sclerosis (Lou Gehrig Disease)

Amyotrophic Lateral Sclerosis Association
21021 Ventura Blvd., Suite 321
Woodland Hills, CA 91364
1-800-782-4747
818-990-2151

Angleman Syndrome

Angleman Research Group
Box J-296, JHM HSC
Div. of Genetics/Pediatrics
University of Florida
Gainesville, FL 32610-0296
904-392-4104

Arnold-Chiari Syndrome

Arnold-Chiari Family Network
c/o Kevin & Maureen Walsh
67 Spring St.
Weymouth, MA 02188
617-337-2368

Arthritis

American Arthritis Organization Arthritis Foundation
1314 Spring St. NW
Atlanta, GA 30309
404-872-7100

Ataxia

National Ataxia Foundation
750 Twelve Oaks Center
15500 Wayzata Blvd.
Wayzata, MN 55391
612-473-7666

Arthrogryposis

National Support Group for Arthrogryposis Multiplex Congenita
P.O. Box 5192
Sonora, CA 95370
209-928-3688

Attention Deficit Disorders

C.H.A.D.D. National
499 NW 70th Ave.
Ste. 308
Plantation, FL 33317
305-587-3700

Autism

Autism Society of America
8601 Georgia Ave., Ste. 503
Silver Spring, MD 20910
301-565-0433

National Autism Hotline/Autism Services Center
Prichard Building
605 Ninth St., P.O. Box 507
Huntington, WV 25701-0507
304-525-8014

Batten Disease

Batten Disease Support and Research Association
2600 Parsons Ave.
Columbus, OH 43207
1-800-448-4570

Children's Brain Diseases

Children's Brain Diseases Foundation
350 Parnassus Ave., Suite 900
San Fransisco, CA 94117
415-565-6259

Beckwith-Wiedemann

Beckwith-Wiedemann Support Network
c/o Susan Fettes
3206 Braeburn Circle
Ann Arbor, MI 48108
313-973-0263

Birth Defects

Association of Birth Defect Children
Orlando Executive Park
5400 Diplomat Circle, Suite 270
Orlando, FL 32810
407-629-1466

March of Dimes Birth Defects Foundation
1275 Mamaroneck Ave.
White Plains, NY 10605
914-428-7100

National Birth Defects Center
Franciscan Children's Hospital
30 Warren St.
Boston, MA 02135
617-787-5958

Brain Tumor

Association for Brain Tumor Research
3725 N. Talman Ave.
Chicago, IL 60618
312-286-5571

Cancer

AMC Cancer Information Center
1600 Pierce St.
Lakewood, CO 80214
1-800-525-3777

American Cancer Society
46 Fifth St. NE
Atlanta, GA 30308
1-800-227-2345
404-320-3333

Cerebral Palsy

United Cerebral Palsy Association
7 Penn Plaza
Suite 804
New York, NY 10001
1-800-872-1827
212-268-6655

Charcot-Marie-Tooth Disease

CMT International
1 Springbank Drive
St. Catharines, ON
Canada L2S 2K1
416-687-3630

Charge Syndrome

CHARGE Accounts
c/o Quota Club
2004 Parkade Blvd.
Columbia, MO 65202
314-442-7604

Chromosome 18

Chromosome 18 Registry & Research Society
c/o Jannine Cody
6302 Fox Head
San Antonio, TX 78247
512-657-4968

Chronic Dizziness and Balance Disorders

Pen Pal Support Group for Chronic Dizziness & Balance Disorders
P.O. Box 305
Elliott, IA 51532
712-767-2325

Chronic Illness

Families of Children Under Stress (FOCUS)
P.O. Box 1058
Conyers, GA 30207
404-483-9845

Parents of Chronically Ill Children
1527 Maryland St.
Springfield, IL 62702
217-522-6810

Cleft Palate

Cleft Palate Foundation
1218 Grandview Ave.
Pittsburgh, PA 15211
1-800-242-5338
412-481-1376

Prescription Parents
P.O. Box 161
W. Roxbury, MA 02132
617-527-0878

Cockayne Syndrome

Share and Care
c/o Pat Cahill
1294 S Street
N. Valley Stream, NY 11580
516-825-2284

Congenital Hypoventilation Syndrome

Congenital Hypoventilation Syndrome
Parent Support Network
71 Maple St.
Oneonta, NY 13820

Cooley's Anemia

Cooley's Anemia Foundation
105 East 22nd St., Ste. 911
New York, NY 10010
212-598-0911

Cornelia De Lange Syndrome

Cornelia De Lange Syndrome Foundation
60 Dyer Ave.
Collinsville, CT 06022-1201
1-800-223-8355
203-693-0159

Cranio-Facial Disorders

FACES National Association for the
Craniofacially Handicapped
P.O. Box 11082
Chattanooga, TN 37401
615-266-1632

International Craniofacial Foundation
10210 N. Central Expy.
Ste. 230 LB37
Dallas, TX 75231
1-800-535-3643
214-368-3590

National Foundation for Facial
Reconstruction
317 East 34th St., 9th Floor
New York, NY 10016
212-263-6656

Cri Du Chat (5p-)

The 5p- Society
11609 Oakmont
Overland Park, KS 66210
913-469-8900

Cystic Fibrosis

Cystic Fibrosis Foundation
6931 Arlington Rd.
Bethesda, MD 20814
1-800-344-4823
301-951-4422

Cystinosis

Cystinosis Foundation
17 Lake Ave.
Piedmont, CA 95612
415-834-7897

Dermatomyositis and Polymyositis

National Support Group for
Dermatomyositis & Polymyositis
1119 Spring Garden Ln.
Bethlehem, PA 18017

Diabetes

American Diabetes Association
National Service Center
1660 Duke St.
Alexandria, VA 22314
1-800-232-3472
703-549-1500

Juvenile Diabetes Foundation International
432 Park Ave. South
New York, NY 10016
1-800-223-1138
212-889-7575

Down Syndrome

Association for Children with Down Syndrome
2616 Martin Ave.
Bellmore, NY 11710
516-221-4700

National Down Sydrome Society
666 Broadway, Suite 810
New York, NY 10012
1-800-221-4602
212-460-9330

National Down Syndrome Congress
1800 Dempster St.
Park Ridge, IL 60068-1146
1-800-232-6372
708-823-7550

Dysautonomia

Dysautonomia Foundation
20 East 46th St.
Room 302
New York, NY 10017
212-949-6644

Dyslexia

Dyslexia Research Inst.
4745 Centerville Rd.
Tallahasse, FL 32308
904-893-2216

Orton Dyslexia Society
Chester Bldg.
Suite 382
8600 LaSalle Rd.
Baltimore, MD 21204-6020
1-800-ABCD123
301-296-0232

Dystonia

Dystonia Medical Research Foundation
First City Building
777 Hornby St., Suite 1800
Vancover, BC
Canada V6Z 2K3
604-661-4886

Dystonia Medical Research Foundation
8383 Wilshire Blvd.
Suite 800
Beverly Hills, CA 90211
213-852-1630

Ehlers-Danlos

Ehlers-Danlos National Foundation
P.O. Box 1212
Southgate, MI 48195
313-282-0180

Eosinophilic Myalgia Syndrome

Eosinophilic Myalgia Syndrome Support Group
c/o T.V. Workshop
3637 Green Rd.
Beachwood, OH 44122
(Mailing Address Only)

Epilepsy

Epilepsy Foundation of America (EFA)
4351 Garden City Drive
Landover, MD 20785
1-800-EFA-1000
301-459-3700

Facial Dystonia

Benign Essential Blepharospasm Research Foundation (BEBRF)
P.O. Box 12468
Beaumount, TX 77726-2468
409-832-0788

Fanconi Anemia

Fanconi Anemia Support Group
66 Club Rd., Ste. 390
Fugene, OR 97401
503-687-4658

Fibular Himimelia

Superkids
60 Clyde St.
Newton, MA 02160
(Mailing Address Only)

Fragile X Syndrome

National Fragile X Syndrome Foundation
1441 York St., Ste. 215
Denver, CO 80206
1-800-688-8765
303-333-6155

Freeman-Sheldon Syndrome

Freeman-Sheldon Parent Support Group
509 E. North Mont Way
Salt Lake City, UT 84103
801-364-7060

Galactosemia

Parents of Galactosemic Children
20981 Solano Way
Boca Raton, FL 33433
407-852-0266

Gaucher Disease

National Gaucher's Foundation
19241 Montgomery Village Ave., E-21
Gaithersburg, MD 20879
202-393-2777

Genetic Conditions

Alliance of Genetic Support Groups
1001 22nd St. NW, Ste. 800
Washington, DC 20037
1-800-336-GENE

Glycogen Storage Disease

Association for Glycogen Storage Disease
P.O. Box 896
Durant, IA 52747
319-785-6038

Goldenhar Syndrome

Kayci Rush-Hall
R.R. #5
Box 265
Buffalo, MN 55313

Growth Disorders

Human Growth Foundation
P.O. Box 3090
Falls Church, VA 22043
1-800-451-6434

Guillain Barré

Guillain Barré Syndrome Support Group
P.O. Box 262
Wynnewood, PA 19096
215-667-0131

Hallerman-Streiff Syndrome

Hallerman-Streiff Suppport Group
1367 Beulah Park
Lexington, KY 40517
(Mailing Address Only)

Head Injuries

National Head Injury Foundation
1140 Connecticut Ave. NW
Suite 812
Washington, DC 20036
1-800-444-NHIF
202-294-6443
(Consumers & Families Only)

Hearing Impairments

American Deafness and Rehabilitation Association
P.O. Box 251554
Little Rock, AR 72225
501-663-7074 (Voice/TDD)

American Society for Deaf Children (ASDC)
814 Thayer Ave.
Silver Spring, MD 20910
1-800-942-2732

American Speech-Language-Hearing Association (ASHA)
10801 Rockville Pike
Rockville, MD 20852
1-800-638-8255 (Voice/TDD)
301-897-5700

National Association of the Deaf (NAD)
814 Thayer Ave.
Silver Spring, MD 20910-4500
301-587-1788
301-587-1789 (TDD)

VOICE for Hearing Impaired Children
360 Bloor St. W.
Suite 412
Toronto, ON
Canada M5S 1X1
416-928-1006

Heart Disorders

American Heart Association
7320 Greenville Ave.
Dallas, TX 75231
214-373-6300

Hemifacia Microsomia

Hemifacial Microsomia Family Support Network
c/o Cynthia Fishman, R.N. & Richard Fishman
6 Country Lane Way
Philadelphia, PA 19115
215-677-4787

Hemochromatosis

Hemochromatosis Research Foundation
P.O. Box 8569
Albany, NY 12208
518-489-0972

Hemophilia

National Hemophilia Foundation (NHF)
110 Greene St., Room 303
New York, NY 10012
212-219-8180

Hereditary Hemorrhagic Telangiectasia (Osler-Weber-Rendu Syndrome)

Hereditary Hemorrhagic Telangiectasia (HTT) Foundation
c/o Sharon Victor
115 Sudden Valley
Bellingham, WA 98226
206-738-7605

Hirschsprung Disease

American Hirschsprung Disease Association
22-1/2 Spruce St.
Brattleboro, VT 05301
802-257-0603
508-452-7952

Histiocytosis

Histiocytosis Association of America
609 New York Rd.
Glassboro, NJ 08028
609-881-4911

Holoprosenphaly

Fighters for Encephaly Defects Support (FEDS)
3032 Brereton Ave.
Pittsburg, PA 15219
412-687-6437

Huntington Disease

Huntington Disease Society of America
140 West 22nd St., 6th Floor
New York, NY 10011-2420
212-242-1968

Hydrocephalus

Hydrocephalus Association
2040 Polk St., Box 342
San Francisco, CA 94109
415-776-4713

Hydrocephalus Support Group
c/o Kathy McGowan
6059 Mission Rd., #106
San Diego, CA 92108
619-282-1070

National Hydrocephalus Foundation
22427 S. River Rd.
Joliet, IL 60436
815-467-6548

Ileitis and Colitis

National Foundation for Ileitis and Colitis
444 Park Ave. South
New York, NY 10016
1-800-932-2423
212-685-3440

Immune Deficiency

Immune Deficiency Foundation (IDF)
P.O. Box 586
Columbia, MD 21045
301-730-8837

Intestinal Pseudo-Obstruction

North American Pediatric
Pseudo-Obstruction Society
P.O. Box 772
Medford, MA 02155
617-395-4255

Intraventricular Hemorrhage

I.V.H. Parents
P.O. Box 56-1111
Miami, FL 33256-1111
305-232-0381

Kidney Disorders

American Kidney Fund
6110 Executive Blvd. #1010
Rockville, MD 20852
1-800-638-8299

National Kidney Foundation
30 East 33rd St., 11th Fl.
New York, NY 10016
1-800-622-9010
212-889-2210

Klipple-Trenaunay

Klipple-Trenaunay Support Group
4610 Wooddale Ave.
Edina, MN 55424
612-925-2596

Lactic Acidosis

Lactic Acidosis Support Group
P.O. Box 480282
Denver, CO 80248-0282
(Mailing Address Only)

Landau-Kleffner Syndrome

C.A.N.D.L.E. Support Group
4414 McCampbell Drive
Montgomery, AL 36106
(Mailing Address Only)

Laurence Moon Bardet Biedl Syndrome

Laurence Moon Bardet
Biedl Syndrome Network
18 Strawberry Hill
Windsor, CT 06095
203-688-7880

Learning Disabilities

Association for Children and
Adults with Learning Disabilities
4156 Library Rd.
Pittsburgh, PA 15234
412-341-1515
412-341-8077

National Center for Learning Disabilities
99 Park Ave.
New York, NY 10016
212-687-7211

Leigh Disease

National Leigh Disease Foundation
601 Taylor St.
Corinth, MS 38834
601-287-8069

Leprosy (Hansen Disease)

American Leprosy Missions
1 ALM Way
Greenville, SC 29601
1-800-543-3131
803-271-7040

Leukemia

Leukemia Society of America
733 Third Ave.
14th Floor
New York, NY 10017
212-573-8484

Leukodystrophy

United Leukodystrophy Foundation
2304 Highland Drive
Sycamore, IL 60178
1-800-728-5483
815-895-3211

Lissencephaly

Lissencephaly Network
c/o Dianna Fitzgerald
7121 Baer Rd.
Ft. Wayne, IN 46809
219-747-1075

Liver Disorders

American Liver Foundation
1425 Pompton Ave.
Cedar Grove, NJ 07009
1-800-223-0179

Children's Liver Foundation
14245 Ventura Blvd.
Suite 201
Sherman Oak, CA 91423
818-906-3021

Lowe Syndrome

Lowe Syndrome Association
222 Lincoln St.
West Lafayette, IN 47906
317-743-3634

Lung Diseases

American Lung Association
1740 Broadway
New York, NY 10019
212-315-8700

Lupus

American Lupus Society
3914 Del Amo Blvd., Suite 922
Torrance, CA 90503
1-800-331-1802
213-542-8891

Lupus Foundation of America
4 Research Place
Suite 180
Rockville, MD 20850-3226
1-800-558-0121

Lyme Disease

Lyme Borreliosis Foundation
P.O. Box 462
Tolland, CT 06084
203-871-2900

Macular Diseases

Association for Macular Diseases
210 East 64th St.
New York, NY 10021
212-605-3719

Malignant Hyperthemia

Malignant Hyperthemia Association of U.S.
P.O. Box 3231
Darien, CT 06820
203-655-3007

Maple Syrup Urine Disease

Maple Syrup Urine Disease Family Support Group
c/o Bonnie Koons
7409 Moyer Rd.
Harrisburg, PA 17112
717-469-7167

Marfan Syndrome

National Marfan Foundation
382 Main St.
Port Washington, NY 11050
516-883-8712

Mental Illness

Federation of Families for Children's Mental Health
National Mental Health Association
1021 Prince St.
Alexandria, VA 22314-2971
1-800-684-7722
703-684-7722

Mental Retardation

The Arc
500 E. Border St., Suite 300
Arlington, TX 76010
817-261-6003
817-277-0553 (TDD)
1-800-433-5255

Canadian Association for
Community Living
Kinsman National Institute
York University
4700 Keele St.
Downsview, ON
Canada M3J 1P3
416-661-9611

Monosomy 9p

Support Group for Monosomy 9p
c/o Jonathan Storr
43304 Kipton Nickel Plate
La Grange, OH 44050
216-775-4255

Mucoploysaccharidosis

National Mucoploysaccharidosis Society
17 Kraemer St.
Hickville, NY 11801
516-931-6338

Zain Hansen M.P.S. Foundation
P.O. Box 4768
Arcata, CA 95521
1-800-767-3121
707-822-5421

Muscular Dystrophy

Muscular Dystrophy Association
3561 E. Sunrise Drive
Tuscon, AZ 85718
602-529-2000

Myasthenia Gravis

Myasthenia Gravis Foundation (MGF)
53 W. Jackson Blvd., Ste. 660
Chicago, IL 60604
1-800-541-5454
312-427-6252

Myeloproliferative Disease

MPD Research Center
2220 Tieman Ave.
Bronx, NY 10469
1-800-HELP-MPD
212-697-5252

Myoclonus

Myoclonus Families United
1564 East 34th St.
Brooklyn, NY 11234
718-252-2133

Nager and Miller Syndromes

Foundation for Nager and Miller
Syndromes
721 S. Carlisle
South Bend, IN 46619
219-289-5611 (Nager)
708-729-0701 (Miller)

Narcolepsy

American Narcolepsy Association
425 California St., Ste.201
San Francisco, CA 94104
415-788-4793

Near Drowning

Parents of Near Drownings (P.O.N.D.S.)
c/o Maureen Ryan
14911 National Ave. Ste. 1-B
Los Gatos, CA 95032
408-997-7226

Neuro-Metabolic Disorders

Association of Neuro-Metabolic Disorders
5223 Brookfield Ln.
Sylvania, OH 43560
419-885-1497

Neurofibromatosis

National Neurofibromatosis Foundation
141 Fifth Ave., Ste. 7-S
New York, NY 10010
1-800-323-7938
212-460-8980

Noonan Syndrome

Noonan Syndrome Support Group
c/o Susan Espinoza
1278 Pine Ave.
San Jose, CA 95125
408-723-5188

Organic Acidemia

Organic Acidemia Association
522 Lander St.
Reno, NV 89509
702-322-5542

Orthopedic Problems and Burns

International Shriners Headquarters
2900 Rocky Point Drive
Tampa, FL 33607
1-800-237-5055
813-281-0300 (in FL)

Ostenoginesis Imperfecta

Ostenoginesis Imperfecta Foundation
P.O. Box 24776
Tampa, FL 33623-4776
813-855-7077

Ostomy

United Ostomy Association
36 Executive Park, Suite 120
Irvine, CA 92714
1-800-826-0826
714-660-8624

Oxalosis and Hyperoxaluria

Oxalosis & Hyperoxaluria Foundation
24815 144th Place SE
Kent, WA 98042
206-631-0386

Paralysis

American Paralysis Association
P.O. Box 187
Short Hills, NJ 07078
1-800-225-0292
201-379-2690 (in NJ)

Parkinson Disease

National Parkinson Foundation
1501 Ninth Ave. NW
Miami, FL 33136
1-800-327-4545
1-800-433-7022 (in FL)

Peroneal Muscular Atrophy

National Foundation for Peroneal Muscular Atrophy
Crozer Enterprise Center
600 Upland Ave.
Upland, PA 19015
215-499-7486

Polycystic Kidney

Polycystic Kidney Research Foundation (PKR)
922 Walnut St., Suite 411
Kansas City, MO 64106
1-800-444-8197
1-800-PKD-CURE
816-421-1869

Porphyria

American Porphyria Foundation
P.O. Box 107
Santa Rosa Beach, FL 32459
904-267-2372

Prader-Willi Syndrome

Prader-Willi Syndrome Association
6409 Excelsior Blvd., E-102
St. Louis Park, MN 55426
612-926-1947

Progeria

Progeria International Registry
c/o Dr. Ted Brown
North Shore University Hospital
300 Community Drive
Mahasset, NY 11030
516-562-4612

Pseudoxanthoma Elasticum

National Association for Pseudoxanthoma Elasticum (PXE)
82 Phillip St.
Albany, NY 12203
518-482-3647

Psoriasis

National Psoriasis Foundation
6443 SW Beaverton Hwy.
Suite 210
Portland, OR 97221
503-297-1545

Purine 24

Purine 24, Inc.
5424 Beech Ave.
Bethesda, MD 20814
301-530-0354

Reflex Sympathetic Dystrophy Syndrome

Reflex Sympathetic Dystrophy Association
822 Wayside Ln.
Haddonfield, NY 08033
215-955-5444
609-428-6980

Rett Syndrome

International Rett Syndrome Association
8511 Rose Marie Drive
Ft. Washington, MD 20744
301-248-7031

Reyes Syndrome

National Reyes Syndrome Foundation
P.O. Box 829
Bryan, OH 43506
1-800-233-7393
1-800-231-7393
(in OH)

Rubinstein-Taybi Syndrome

Rubinstein-Taybi Parent Group
414 E. Kansas
Smith Center, KS 66967
913-282-6237

Russell-Silver Syndrome

Association for Children With
Russell-Silver Syndrome
22 Hoyt St.
Madison, NJ 07940
201-377-4531

Scoliosis

National Scoliosis Foundation
72 Mt. Auburn St.
Watertown, MA 02172
617-926-0397

Seizure Disorder

THRESHOLD Intractable Seizure Disorder
Support Group
c/o Barbara Schwan
29 Melrose Terrace
Middletown, NJ 07748
908-957-0714

Short Stature

Little People of America
P.O. Box 9897
Washington, DC 20016
1-800-243-DWARF

Parents of Dwarfed Children
c/o Margaret B. Badner
11524 Colt Terrace
Silver Spring, MD 20902
301-649-3275

Sickle Cell Disease

National Association for Sickle Cell Disease (NASCD)
3345 Wilshire Blvd., #1106
Los Angeles, CA 90010-1880
1-800-421-8453
213-736-5455

Skin Disorders

Dystorophic Epidermolysis Bullosa Research Association of America (D.E.B.R.A.)
141 Fifth Ave., Ste. 7-S
New York, NY 10010
212-955-2220

Foundation for Ichthyosis and Related Skin Types (F.I.R.S.T.)
P.O. Box 20921
Raleigh, NC 27619-0921
919-782-5728

National Alopecia Areata Foundation
P.O. Box 150760
San Rafael, CA 94915-0760
415-456-4644

National Congenital Port Wine Stain Foundation
125 East 63rd St.
New York, NY 10021
212-755-3820

National Foundation for Ectodermal Dysplasia
219 E. Main
P.O. Box 114
Mascoutah, IL 62258
618-566-2020

Scleroderma Association
c/o Marie Coyle
P.O. Box 910
Lynnfield, MA 01940
508-535-6600

United Scleroderma Foundation
P.O. Box 399
Watsonville, CA 95077-0399
1-800-722-HOPE
408-728-2202

Xeroderma Pigmentosum Registry
UMDNJ, New Jersy Medical School
Dept. of Pathology
Room C-520
Medical Science Building
185 S. Orange Ave.
Newark, NJ 07103-2714
201-456-6255

Soto Syndrome

Soto Syndrome Support Association (SSSA)
c/o Joan Neshek-Dowe
797 W. Lockwood Blvd.
Glendale, MO 63122
314-966-4194

Spina Bifida

Spina Bifida Association of America
1700 Rockville Pike
Suite 250
Rockville, MD 20852-1654
1-800-621-3141
301-770-7222

Spina Bifida Association of Canada
33 Wellington Crescent
Winnipeg, MB Canada R3M 0A8
204-452-7580

Spinal Cord Injuries

National Spinal Cord Injury Association
600 W. Cummings Pk. #2000
Woburn, MA 01801
1-800-962-9629
617-935-2722

National Spinal Cord Injury Hotline
2201 Argonne Drive
Baltimore, MD 21218
1-800-526-3456

Spinal Muscular Atrophy

Families of S.M.A.
P.O. Box 1465
Highland Park, IL 60035-7465
708-432-5551

Sturge-Weber

Sturge-Weber Foundation
P.O. Box 460931
Aurora, CO 80046
1-800-627-5482
303-690-9735

Stuttering

National Center for Stuttering
200 East 33rd St.
New York, NY 10016
1-800-221-2483
212-532-1460 (in NY)

National Stuttering Project
4601 Irving St.
San Fransisco, CA 94122
415-566-5324

Stuttering Foundation of America
P.O Box 11749
Memphis, TN 38111-0749
1-800-992-9392
202-363-3199

Sudden Infant Death Syndrome

National Sudden Infant Death Syndrome (SIDS) Alliance
10500 Little Patuxent Pky.
Suite 420
Columbia, MD 21044
1-800-221-SIDS
301-964-1-8000

Tay-Sachs Disease

National Tay-Sachs and Allied Diseases Association
2001 Beacon St.
Suite 304
Brookline, MA 02146
617-277-4463

Technology-Dependent Children

Sick Kids Need Involved People (SKIP)
216 Newport Drive
Severna Park, MD 21146
301-647-0164

Terminal Illness

Children's Hospice International
901 N. Washington St.
Suite 700
Alexandria, VA 22314
1-800-24-CHILD
703-684-0330

Thrombocytopenia Absent Radius Syndrome

Thrombocytopenia Absent Radius Syndrome Association (TARSA)
312 Sherwood DR., RD1
Linwood, NJ 08221
609-927-0418

Tourette Syndrome

Tourette Syndrome Association
42-40 Bell Blvd.
Bayside, NY 11361-2861
1-800-237-0717
718-224-2999

Treacher Collins Disease

Treacher Collins Foundation
c/o Hope Charkins-Drazin and David Drazin
P.O. Box 5
Concord, NH 03302-0005
802-649-3020

Trisomy 18, 13

Support Organization for Trisomy 18, 13 & Related Disorders
c/o Barb Van Herreweghe
2982 S. Union St.
Rochester, NY 14624
716-594-4621

Tuberous Sclerosis

National Tuberous Sclerosis Association
8000 Corporate Drive
Suite 120
Landover, MD 20785
1-800-255-NTSA
301-459-9888

Turner Syndrome

Turner Syndrome Society
Administrative Studies Bldg.
Room 006
4700 Keele St., York Univ.
Downsview, ON Canada M3J 1P3
416-736-5023

Vestibular Disorders

Vestibular Disorders Association
1015 NW 22nd Ave., D230
Portland, OR 97210-3079
503-229-7705

Visual Impairments

American Council of the Blind
1155 15th St. NW, Ste. 720
Washington, DC 20005
1-800-424-8666
202-467-5081

American Foundation for the Blind
15 West 16th St.
New York, NY 10011
1-800-AF-BLIND
212-620-2043

American Printing House for the Blind
1839 Frankfort Ave.
P.O. Box 6085
Louisville, KY 40206-0085
502-895-2405

Blind Children's Center
4120 Marathon St.
P.O. Box 29159
Los Angeles, CA 90029
1-800-222-3566
1-800-222-3567 (in California)

Canadian National Institute for the Blind
1929 Bayview Ave.
Toronto, ON
Canada M4G 3E8
416-486-2500

National Society to Prevent Blindness
500 E. Remington Rd.
Schaumburg, IL 60173-4557
1-800-331-2020
708-843-2020

National Association for Parents of the Visually Impaired
2180 Linway Drive
Beloit, WI 53511
1-800-562-6265
608-362-4945

National Association for Visually Handicapped
22 West 21st St., 6th Fl.
New York, NY 10010
212-889-3141

National Foundation of the Blind
1800 Johnson St.
Baltimore, MD 21230
301-659-9314

National Retinoblastoma Parent Group
603 Fourth Range Rd.
Pembroke, NH 03275
603-224-4085

National Society to Prevent Blindness
500 E. Remington Rd.
Schaumburg, IL 60173-4557
1-800-331-2020
708-843-2020

Parents and Cataract Kids (PACK)
c/o Geraldine Miller
P.O. Box 73
Southeastern, PA 19399
215-352-0719

Recording for the Blind
20 Roszel Rd.
Princeton, NJ 08540
609-452-0606

Retinitis Pigmentosa International Society for Degenerative Eye Diseases
P.O. Box 900
Woodland Hills, CA 91365
1-800-344-4877
818-992-0500

RP Foundation
1401 Mt. Royal Ave., 4th Fl
Baltimore, MD 21217
1-800-638-2300
301-225-9400 (9404 - TDD)

Vision Foundation
818 Mt. Auburn St.
Watertown, MA 02172
1-800-852-3029 (in MA)
617-926-4232

Vitiligo

National Vitiligo Foundation
P.O.Box 6337
Tyler, TX 75711
214-534-2925

Wegener's Granulomatosis

Wegener's Granulomatosis
9000 Rockville Pike
Bldg. 31A-R, Rm. B1W30
Bethesda, MD 20892
(Mailing Address Only)

William Syndrome

William Syndrome Association
P.O. Box 178373
San Diego, CA 92177-8373
314-227-4411

Wilson Disease

Wilson Disease Association
P.O. Box 75324
Washington, DC 20013
703-636-3003
703-636-3014

Access Buyer's Guide

Bathroom Access

Columbia Medical Mfg. Corp.
P.O. Box 633
Pacific Palisades, CA 90272
310-454-6612
Toilet support

The Adaptive Design Shop
12487 Pt. Pleasant Drive
Fairfax, VA 22033
703-631-1585
Toilet support

Building Access

Achievement Products
P.O. Box 9033
Canton, OH 44711
216-453-2122
Positioning, mobility

Care Catalog Services
1877 N.E. Seventh Ave.
Portland, OR 97212
503-288-8174
Positioning, mobility

Consumer Care Prod., Inc.
P.O. Box 684
Sheboygan, WI 53082
414-459-8353
Standing, positioning

Handi-Ramps, Inc.
P.O. Box 745
1414 Armour Blvd.
Mundelein, IL 60060-0745
1-800-876-RAMP
Ramp systems, handrailings

Kid-Kart, Inc.
7175 Sypes Canyon Rd.
Bozeman, MT 59715
1-800-388-5278
Stroller, accessories

Martin Technology
29 North Main St.
Gloversville, NY 12078-3093
1-800-800-1410
518-725-2455
Stairclimber

Quickie Designs, Inc.
2842 Business Park Ave.
Fresno, CA 93727
209-292-2171
Mobility, seating

Classroom Access

BrainTrain
1915 Huguenot Road
Richmond, VA 23235
1-800-633-1221
Special software

ComputAbility Corporation
40000 Grand River, Ste. #109
Novi, MI 48375
1-800-477-6720
Computer access products

Consumer Care Prod., Inc.
P.O. Box 648
Sheboygan, WI 53082
414-459-8353
Workstations

Creative Learning
P.O. Box 829
North San Juan, CA 95960
1-800-842-5360
Adaptive software, hardware

Flaghouse
150 No. MacQuestin Pkwy.
Mount Vernon, NY 10550
1-800-793-7900
Educational materials

Innocomp
33195 Wagon Wheel
Solon, OH 44139
216-248-6206
Digit. speech, aug. commun.

Jesana Ltd.
P.O. 17
Irvington, NY 10533
1-800-433-4728
Aug. communication devices

Kapable Kids
(Toys for kids with physical or mental disabilities)
1-800-356-1564

Marblesoft
21805 Zumbrota NE
Cedar, MN 55011
612-434-3704
Early learning software

Phonic Ear, Inc.
3880 Cypress Drive
Petaluma, CA 94954
707-769-1110
Communication products

R.J. Cooper Associates
24843 Del Prado, Ste. 283
Dana Point, CA 92629
714-240-1912
Switches, software

Therapeutic Toys, Inc.
34 N. Moodus
Moodus, CT 06469
203-873-2003
Adaptive toys, switches

Toys for Special Children
385 Warburton Ave.
Hastings-on-Hudson, NY 10706
914-478-0960
1-800-832-8697

Playground Access

Flaghouse
150 No. MacQuestin Pkwy.
Mount Vernon, NY 10550
1-800-793-7900
Recreational products

Kapable Kids
(Toys for kids with physical or mental disabilities)
1-800-356-1564

Landscape Structures, Inc.
601 7th Street South
Delano, MN 55328
612-972-3391
1-800- 328-0035

PCA Industries, Inc.
5642 Natural Bridge
St. Louis, MO 63120
1-800-727-8180
Adaptive playground equipment

Parity, Inc.
P.O. Box 3593
Oak Park, IL 60302
1-800-848-3585
Aerosling swing

Woodset
Box 2127
Waldorf, MD 20604
1-800-638-9663
Adaptive playground equipment

Transportation

Columbia Medical Mfg. Corp.
P.O. Box 633
Pacific Palisades, CA 90272
310-454-6612
Car seat

Convaid Products, Inc.
P.O.Box 2458
Rancho Palos Verdes, CA 90274
1-800-522-1020
310-539-6814
Buggies, tie-downs, restraints

Crow River Industries
14800 28th Street Ave. N
Minneapolis, MN 55447
1-800-328-3632
612-559-1680
Lifts for vans, buses

E-Z-On Products, Inc.
500 Commerce Way West
Jupiter, FL 33458-8844
1-800-323-6598
407-747-6920
Restraints, harnesses, vests

Handi-Ramps, Inc.
P.O. Box 745
1414 Armour Blvd.
Mundelein, IL 60060-0745
1-800-876-RAMP
Van ramps, portable ramps

J. A. Preston
P.O. Box 3697 , Dept 1094
Grand Rapids, MI 49501-3697
1-800-631-7277
Bus seats

Jesana Ltd.
P.O. 17
Irvington, NY 10533
1-800-433-4728
Bus tie-downs.

Mark's Auto Upholstering
170 School St.
Mansfield, MA 02048
1-800-834-8746 (in MA)
508-339-4100
Safety belts, restraints

Ortho-Kinetics, Inc.
P.O. Box 1647
Waukesha, WI 53187
1-800-558-7786
Travel chair

QStraint
4248 Ridge Lea Rd.
Buffalo, NY 14226
716-831-9959
Restraint system, fully-tested

The Braun Corporation
1014 S. Monticello Street
Winamac, IN 46996
1-800-843-5438
219-946-6153 (in IN)
Lifts, vans

Federal Agencies

Administration for Children, Youth and Families
P.O. Box 1182
Washington, DC 20013
202-245-0347

Administration on Developmental Disabilities (DHHS)
200 Independence Ave. SW
329D Humphrey Bldg.
Washington, DC 20201
202-245-2890

Bureau of Maternal and Child Health and Resources Development
Parklawn Building
5600 Fishers Ln.
Room 9-11
Rockville, MD 20857
301-443-2170

Department of Health and Human Services
(Medicare/Medigap Information & Second Surgical Opinion Program)
Health Care Financing Admin.
Baltimore, MD 21235
1-800-638-6833
1-800-492-6603 (in MD)

National Center for Education in Maternal and Child Health
38th and R Streets NW
Washington, DC 20057
202-625-8400
202-625-8410 (Clearinghouse)

National Information Center for Children and Youth with Disabilities (NICHCY)
P.O.Box 1492
Washington, DC 20013
1-800-999-5599
703-893-8614
703-893-8614 (TDD)

National Institute of Child Health and Human Development
National Institutes of Health
9000 Rockville Pike
Bldg. 31, Rm. 2A03
Bethesda, MD 20892
301-496-3454

National Institute of Neurological & Communicative Disorders
9000 Rockville Pike
Bethesda, MD 20892
301-469-5751

National Library Service for the Blind and Physically Handicapped
Library of Congress
1291 Taylor St. NW
Washington, DC 20542
1-800-424-8567
202-707-5100

Office of Special Education and Rehabilitaton Services
Clearinghouse on Disability Information
U.S. Department of Education
Switzer Building
330 C Street SW, Rm. 3132
Washington, DC 20202-2524
202-732-1723
202-732-1241

President's Committee on Employment of People with Disabilities
1331 F Street NW
Washington, DC 20004-1107
202-376-6200
202-376-6205 (TDD)

Social Security Admin. Hotline
1-800-234-5772
1-800-325-0778 (TDD)

Volunteers in Service to America (VISTA) Foster Grandparents Program - ACTION
Public Affairs Division
1100 Vermont Ave. NW
Washington, DC 20525
202-606-5108

The Americans with Disabilities Act Technical Assistance Resource List

Title I (employment) information contact:

Equal Employment Opportunity Commission
1801 L Street NW
Washington, DC 20507
1-800-669-EEOC
1-800-800-3302 (TDD)
202-663-4400

Title II (state and local government) or Title III (public accommodations) information contact:

Public Access Section
Civil Rights Division
U.S. Department of Justice
P.O. Box 66738
Washington, DC 20035-6738
202-514-0301
202-514-0383 (TDD)
202-514-6193 (electronic bulletin board)

Physical barrier removal information contact:

Adaptive Environments
374 Congress Street, Suite 301
Boston, Massachusetts 02210
617-695-1226 (voice and TDD)

Barrier Free Environments, Inc.
P.O. Box 30634
Highway 70 West-Watergarden
Raleigh, North Carolina 27622
919-782-7823 (voice and TDD)

ADA Accessibility Guidelines information contact:

Architectural and Transportation Barriers Compliance Board (Access Board)
1331 F Street, NW, Suite 1000
Washington, DC 20004-1111
202-272-5434
202-272-5447 Fax

Transportation regulations information contact:

Department of Transportation
400 Seventh St. SW, Room 10424
Washington, DC 20590
202-366-9305
202-755-7687 (TDD)

Telecommunication regulations information contact:

Federal Communications Commission
1919 M Street NW
Washington, DC 20554
202-632-7260
202-632-6999 (TDD)

Tax provisions information contact:

Internal Revenue Service
Office of the Chief Counsel
P.O. Box 7604, Benjamin Franklin Station
Washington, DC 20044
202-566-3292 (Voice only)

U.S. Department of Justice
Civil Rights Division
1425 NewYork Avenue, NW
Washington, DC 20004-9998

List of Documents Available:

1. *Title II Regulation State and Local Government Services*
2. *Title III Regulation Public Accommodations and Commercial Facilities*
3. *ADA Highlights Title II* (7 pages)
4. *ADA Highlights Title III* (10 pages)
5. *Americans with Disabilities Act* (Pamphlet)
6. *Americans with Disabilities Act Statutory Deadlines* (Fact Sheet)
7. *Americans with Disabilities Act Requirements in Public Accommodations* (Fact Sheet)
8. *Americans with Disabilities Act* (General Fact Sheet)
9. *The Americans with Disabilities Act Questions and Answers* (Pamphlet)
10. *The Americans with Disabilities Act Handbook* (includes regulations for Titles I, II and III, the ADA Accessibility Guidelines, Uniform Accessibility Standards, and a Resource Guide)

These documents are available in the following formats:

- Large Print
- Braille
- Computer disk
- Audiotape
- Electronic bulletin board (202-514-6193)

Available from:
Public Access Section
Civil Rights Division
U.S. Department of Justice
P.O. Box 66738
Washington, DC 20035-6738
202-514-0301 (Voice)
202-514-0381 (TDD)

ENFORCEMENT OF THE ADA

Effective Date

The ADA requirements for public accommodations and commercial facilities generally became effective on January 26, 1992. Any building alternations made after January 26, 1992 must be readily accessible to, and usable by, people with disabilities. These alterations must comply with the ADA Accessibility Guidelines (ADAAG) to the maximum extent feasible.

Also, all new buildings designed for first occupancy after January 26, 1993 must comply with the ADAAG. (Under very rare circumstances, making a new building fully accessible may be structurally impracticable. Consult the *ADA Title III Technical Assistance Manual* for more specific guidance.)

Enforcement

Title III of the ADA can be enforced by civil suits in the courts. Individuals claiming discrimination can file private civil suits with the courts or file a complaint with the United States Department of Justice, which may later file suit. In civil suits, the court may:

- issue a temporary or permanent injunction to require correction of the barrier violation, provisions of auxiliary aids, or modifications in policies, practices or procedures, and
- award attorney's fees and court costs to the prevailing party (except the United States).

Monetary damages are not awarded in private civil suits. However, in cases brought by the Department of Justice, monetary damages can be awarded to the wronged party, and the courts can assess fines ranging up to $50,000 for the first offense and $100,000 for each additional offense.